



CITY OF AKRON HISTORIC DISTRICT APPLICATION

FOR STAFF USE ONLY

Application Number _____

Date Received _____

Date U.D.H.P. Commission Approved _____

SUBMISSIONS

\$250.00 Non-refundable application fee

Legal description of the district and each historic landmark property contained within.

Proof of age.

APPLICANT INFORMATION

(Please write or print legibly) See sheet 1A for additional property address blanks

Property(s) Address _____

Applicant Name _____ Day Telephone _____

Mailing Address _____

City _____ State _____ Zip _____

* If the applicant is not the owner

Property Owner(s) _____ Day Telephone _____

Mailing Address _____

City _____ State _____ Zip _____

Property owner(s) notified by applicant

Certified Mail receipt(s) attached

NOTE: No further action on the proposed designation will occur until 30 days after the owner or owners are notified. Date owner(s) received notice: _____

Check all boxes that apply to your project.

- (1) "HISTORIC DISTRICT" MEANS ANY AREA CONTAINING ELIGIBLE HISTORIC LANDMARKS WHICH:
 - (A) HAS HISTORIC SIGNIFICANCE IN ITS TOTALITY, OR
 - (B) REPRESENTS PERIODS OR STYLES OF ARCHITECTURE TYPICAL IN HISTORY, OR ARE AN ASSEMBLAGE OF STRUCTURES IMPORTANT TO HISTORY, OR
 - (C) CAUSES AN AREA, BY REASON OF HISTORIC SIGNIFICANCE, ARCHITECTURE, OR ASSEMBLAGE, TO CONSTITUTE AN IDENTIFIABLE AREA.
- (2) LANDMARKS, SITES, AND DISTRICTS OF HISTORICAL, CULTURAL OR SOCIAL IMPORTANCE TO THE COMMUNITY, OR CEMETERIES, BIRTHPLACES OR GRAVES OF HISTORICAL FIGURES, PROPERTIES OWNED BY LOCAL INSTITUTIONS, STRUCTURES MOVED FROM ORIGINAL LOCATIONS, RECONSTRUCTED HISTORIC BUILDINGS, OR PROPERTIES ACHIEVING SIGNIFICANCE WITHIN THE LAST FIFTY (50) YEARS SHALL NOT BE CONSIDERED ELIGIBLE FOR DESIGNATION UNLESS THE STRUCTURE IS A:
 - (A) PROPERTY SIGNIFICANT BECAUSE OF ARCHITECTURAL OR ARTISTIC DISTINCTION OR HISTORICAL IMPORTANCE, OR
 - (B) BUILDING OR STRUCTURE MOVED FROM ITS ORIGINAL LOCATION BUT SIGNIFICANT FOR ARCHITECTURAL VALUE, OR WHICH IS THE SURVIVING STRUCTURE ASSOCIATED WITH A HISTORICAL PERSON OR EVENT, OR
 - (C) BIRTHPLACE OR GRAVE OF A HISTORICAL FIGURE IF NO OTHER APPROPRIATE SITE OR BUILDING ASSOCIATED WITH THAT FIGURE EXISTS, OR
 - (D) CEMETERY SIGNIFICANT BY CONTAINING GRAVES OF IMPORTANT PERSONS FROM AGE, FROM DESIGN FEATURES, OR FROM ASSOCIATION WITH HISTORIC EVENTS, OR
 - (E) RECONSTRUCTED BUILDINGS EXECUTED IN A SUITABLE ENVIRONMENT AND PRESENTED AS PART OF A RESTORATION MASTER PLAN WHEN NO OTHER BUILDING OR STRUCTURE WITH THE SAME ASSOCIATION SURVIVES, OR
 - (F) PROPERTY COMMEMORATIVE IN INTENT OF DESIGN, AGE, TRADITION, OR SYMBOLIC VALUE INVESTED WITH ITS OWN HISTORICAL SIGNIFICANCE, OR
 - (G) PROPERTY ACHIEVING SIGNIFICANCE WITHIN THE LAST FIFTY (50) YEARS IF EXCEPTIONALLY IMPORTANT OR UNIQUE, OR
 - (H) BUILDING, STRUCTURE OR PROPERTY THAT IS AN INTEGRAL PART OF AN HISTORIC DISTRICT.
- (3) AMENDMENT TO AN EXISTING HISTORIC DISTRICT.

APPLICANT INFORMATION

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Applicant Name _____ Day Telephone _____

Mailing Address _____

City _____ State _____ Zip _____

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Mailing Address _____

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CITY OF AKRON HISTORIC DISTRICT INVENTORY

NOTE: This sheet must be filled out for each site, structure, building or object within the proposed historic district.

1. Application No. (Staff use only)		3. Present Name(s) of Structure(s)	
2. <input type="checkbox"/> Site <input type="checkbox"/> Structure <input type="checkbox"/> Building <input type="checkbox"/> Object		4. Other Name(s) of Structure(s)	
5. Specific Location		12. Date(s) or Period	22. No. of Stories
		13. Style or Design	23. Basement?
		14. Architect or Engineer	24. Foundation Material
		15. Contractor or Builder	25. Wall Construction
		16. Original Use, if known	26. Roof Type & Material
		17. Present Use	27. No. of Bays Front Side
		18. Ownership <input type="checkbox"/> Public <input type="checkbox"/> Private	28. Wall Treatment
		19. Owner's Name & Address	29. Plan Shape
			30. Changes <input type="checkbox"/> Altered <input type="checkbox"/> Addition <input type="checkbox"/> Moved
			31. Condition
7. On National Register? <input type="checkbox"/> Yes <input type="checkbox"/> No	8. Is it Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No	20. Open to Public? <input type="checkbox"/> Yes <input type="checkbox"/> No	32. Preservation Underway? <input type="checkbox"/> Yes <input type="checkbox"/> No
9. Part of Estab. Hist. Dist.? <input type="checkbox"/> Yes <input type="checkbox"/> No	10. District Potential? <input type="checkbox"/> Yes <input type="checkbox"/> No	21. Local contact person or Organization	33. Endangered? <input type="checkbox"/> Yes <input type="checkbox"/> No
11. Name of Established District		Phone#	34. Visible from Public St.? <input type="checkbox"/> Yes <input type="checkbox"/> No
36. Further Description of Important Features		35. Dist. from & Frontage on St.	
37. Description of Interior Fixtures Included in Designation			
38. History And Significance			
39. Description of Environment And Outbuildings		Prepared by	
		Organization	
40. Sources of Information		Date	Revision Date



CITY OF AKRON HISTORIC DISTRICT SUBMISSION REQUIREMENTS

1. Completed Historic District Application form(s).
2. Completed Historic District Inventory form(s).
3. Legal Description of the district and each historic landmark property contained within.
4. Proof of age of the district and each historic landmark property contained within.
5. Color Photos: Take several pictures of the proposed district. Include general photos of each side of each site, building, structure, or object.
Also include close-ups of the specific interior and exterior features.
Identify location of photo on the site plan where practical.
Photos to be 5"x7", 35mm only. Polaroids will NOT be accepted.
On the back of each photo,

note the application number, the address, and view.
6. Site Plan: An 11"x17" site plan must be included. The plan should be drawn to scale and must show property lines, structures, and landscaping, and their relationship to adjacent structures.
7. Architectural or Construction Drawings (if available): Include 11"x17" site plan, elevations, floor plans, details, and landscaping. An accurate sketch or rendering is also desirable.
8. Non-refundable application fee of \$250.00. (checks payable to the City of Akron)

Please send or deliver completed applications, plans, etc. to:

The City of Akron
Urban Design and Historic Preservation Commission
161 S. High St./Suite 201-A
Akron, Ohio 44308-1654

Applications will not be processed without supporting information, photos, and application fee as noted above, and proof that owner (if not applicant) has been notified.

Plan to attend the U.D.H.P. Commission meeting and to answer questions they may have regarding your application. If the applicant is not present, and questions arise, it is likely that the application will be continued until the next meeting.

If you have any questions, contact:

Thomas L. Long
Department of Planning & Urban Development
Telephone: (330) 375-2750