



# HISTORIC SITE AND MONUMENT COMMISSION (HSMC)

Application for Historical Markers, Monuments, and Public Art

HSMC reviews all historical markers, monuments, and public art on public property and all markers visible from the public right-of-way on private property within all local historic districts. Applications must be complete before the HSMC can begin the review process. Submit this application form and all supplemental documentation as required in the "Instructions: Submittal Criteria Checklist" with one hard copy and in PDF electronic format. Electronic files can be emailed (10mb limit) or submitted with the application on a disc.

**File No.:** \_\_\_\_\_ (staff only)

**Applicant Contact Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**Property Owner Contact Information and Consent** (Complete only if the marker will be on private property):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**Official Correspondence:**  Applicant  Owner  Other \_\_\_\_\_ (Check all that apply)

**Property Information for Proposed Marker:** (PIN information can be found at [www.sagis.org](http://www.sagis.org).)

Public Property  Private Property PIN (Property Identification Number): \_\_\_\_\_

Address: \_\_\_\_\_

**Scope of Work:** (Check all that apply.)

<b>HISTORICAL MARKER:</b>	<b>MONUMENT:</b>
<input type="checkbox"/> Freestanding	<input type="checkbox"/> Person
<input type="checkbox"/> Wall-Mounted	<input type="checkbox"/> Place
<input type="checkbox"/> Ground-Embedded	<input type="checkbox"/> Event
<input type="checkbox"/> Other	<input type="checkbox"/> Other
<b>PUBLIC ART (commissioned or existing work):</b>	
<input type="checkbox"/> Mural	
<input type="checkbox"/> Sculpture	
<input type="checkbox"/> Other	

**Project Description:** Describe the proposed project and scope of work in detail. Additional pages may be attached. Submit all supplemental documentation as required in the separate "Instructions: Submittal Criteria Checklist."

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Questions: Email the Preservation Department at [historic@thempc.org](mailto:historic@thempc.org) or call 912-651-1440.

Email, Hand Deliver or Mail Applications: MPC, Historic Preservation Department, 110 East State Street, Savannah, GA 31401

**2018 Savannah-Chatham County Historic Site and Monument Commission Meeting Schedule:**

<b>Application Deadline</b> (Due by Close of Business: 5pm)	<b>Meeting Date</b>
<input type="checkbox"/> December 7, 2017	January 4, 2018
<input type="checkbox"/> January 4, 2018	February 1, 2018
<input type="checkbox"/> February 1, 2018	March 1, 2018
<input type="checkbox"/> March 1, 2018	April 5, 2018
<input type="checkbox"/> April 5, 2018	May 3, 2018
<input type="checkbox"/> May 3, 2018	June 7, 2018
<input type="checkbox"/> June 7, 2018	July 5, 2018
<input type="checkbox"/> July 5, 2018	August 2, 2018
<input type="checkbox"/> August 2, 2018	September 6, 2018
<input type="checkbox"/> September 6, 2018	October 4, 2018
<input type="checkbox"/> October 4, 2018	November 1, 2018
<input type="checkbox"/> November 1, 2018	December 6, 2018

**Estimated Cost of the Proposed Work:** \$ \_\_\_\_\_

**Filing Fee Schedule:**

No filing fee is required for HSMC review.

**Public Notice for Historic Site and Monument Commission Meetings:**

The applicant is responsible for posting the Board Meeting signs provided by the MPC fifteen (15) days prior to the HSMC Meeting. Refer to *Chapter 9 of the Markers, Monuments, and Public Art Master Plan and Guidelines for the City of Savannah* for additional posting requirements.

**Signature of Legal Owner or Authorized Agent:**

I have read and understand all the information enclosed in this application form. I understand that an Escrow Payment is required for any historical marker erected on public property. I hereby certify that I am the legal owner or authorized agent for the legal owner of the subject property.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_