



## 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; markers, monuments, and public art visible from the public right-of-way on private property within all local historic districts; murals visible from the public right-of-way. 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

**2019 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 6, 2018	January 3
<input type="checkbox"/> January 10	February 7
<input type="checkbox"/> February 7	March 7
<input type="checkbox"/> March 7	April 4
<input type="checkbox"/> April 4	May 2
<input type="checkbox"/> May 9	June 6
<input type="checkbox"/> June 13	July 11*
<input type="checkbox"/> July 5	August 1
<input type="checkbox"/> August 8	September 5
<input type="checkbox"/> September 5	October 3
<input type="checkbox"/> October 10	November 7
<input type="checkbox"/> November 7	December 5
<input type="checkbox"/> December 5	

\* Rescheduled due to holiday

**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:**\_\_\_\_\_