



HISTORIC PRESERVATION COMMISSION
1400 N. BOULEVARD
TAMPA, FLORIDA 33607
PHONE (813) 274-3100, OPTION 3

Application for City of Tampa Local Historic Designation

This space for HPC office use only <input type="checkbox"/> Local Landmark <input type="checkbox"/> Multiple Properties Listing: _____ <input type="checkbox"/> Contributing Structure to the <input type="checkbox"/> Local and/or <input type="checkbox"/> National _____ Historic District <input type="checkbox"/> Currently in the Local Historic District <input type="checkbox"/> Currently in the National Historic District	Case No.: HPC _____
	Received by: _____
	Date: _____

1. Applicant/Owner Information

Date of Application: _____

Name of Applicant: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ E-Mail Address: _____

Is the Applicant the Property Owner? Yes No

***If the applicant is not the owner, an Affidavit to Authorize Agent is required.**

Name of Property Owner: _____
(if different from applicant)

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

Phone Number: _____ E-Mail Address: _____

***If the property is under multiple ownership, attach additional sheets as necessary.**

2. Property Information

Address: _____ City: Tampa State: Florida Zip Code: _____

Folio #: _____ Pin #: _____

Lot(s): _____ Block: _____ Subdivision: _____

Date of Construction: _____ Architect(s), if known: _____

3. Reason for Applying for Designation

(attach additional sheets as necessary)

4. Exhibits

Required attachments:

- Current deed to the property, indicating ownership and legal description
- Proof of legal authority to sign for ownership (if property has multiple owners or is owned by an organization)
- Recent color photographs of all elevations of the structures on the property and all site elements
- Location map

Additional attachments: If available, please attach the property survey, historic photographs, drawings, plans, or other documents.

5. Please read and sign below:

By submission of this Application for City of Tampa Local Historic Designation, you are requesting the evaluation of your property’s historic significance in accordance with the criteria set forth in Section 27-257, City of Tampa Code of Ordinances. Based on this request, the property may be determined eligible for local historic designation as a Landmark or as part of a Multiple Property Designation.

Historic properties designated by the City of Tampa as a Landmark or as part of a Multiple Property Designation are subject to the requirements of Chapter 27, Article II, Division 4, City of Tampa Code of Ordinances, and are required to receive a Certificate of Appropriateness from the Architectural Review Commission or the Barrio Latino Commission, as applicable, for exterior changes to the building and site, as more specifically as delineated in Sections 27-95 and 27-113, City of Tampa Code of Ordinances.

The Application for City of Tampa Local Historic Designation must be signed by the all owners (or their authorized agents) of the real property included in the request in order to be considered complete. Attach additional sheets if necessary.

Signature (Owner/Authorized Agent)	Printed Name	Date
Signature (Owner/Authorized Agent)	Printed Name	Date

STATE OF FLORIDA – COUNTY OF HILLSBOROUGH

Sworn to (or affirmed) and subscribed before me, by means of physical presence or online notarization, this _____ day of _____, 20____, by the above named Property Owner(s)/Agent(s). Such person(s) is/are personally known to me or produced a/an _____ state driver license(s)/ID card(s) as identification.

[AFFIX NOTARY PUBLIC SEAL]

Signature: _____
 Printed Name: _____
 Notary Public, State of Florida
 My commission expires: _____ Serial No if any: _____



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Affidavit to Authorize Agent

STATE OF FLORIDA - COUNTY OF HILLSBOROUGH

_____ who reside(s) at
(NAME OF ALL PROPERTY OWNERS)

(ADDRESS: STREET, CITY, STATE, ZIP) (PHONE NUMBER)

being first duly sworn, depose(s) and say(s):

1. That (I /we) are the owner(s) and record title holder(s) of the following property:

2. That this property constitutes the property for which a request for proposed work: (NATURE OF REQUEST)

is being applied to the **Historic Preservation Commission**.

3. That the undersigned (has/have) appointed and (does/do) appoint: **(Agent Name)** _____
(Address) _____ (Phone) _____
as (his/her/their) agent(s) to execute any petitions or other documents necessary to affect such petition;
4. That this affidavit has been executed to induce the City of Tampa, Florida, to consider an act on the above described property;
5. That (I/we), the undersigned authority, hereby certify that the foregoing is true and correct.

SIGNED (**Property Owner**)

SIGNED (**Property Owner**)

SIGNED (**Property Owner**)

SIGNED (**Property Owner**)

STATE OF FLORIDA – COUNTY OF HILLSBOROUGH
Sworn to (or affirmed) and subscribed before me, by means of physical presence or online notarization, this _____ day of _____, 20____, by the above named Property Owner(s)/Agent(s). Such person(s) is/are personally known to me or produced a/an _____ state driver license(s)/ID card(s) as identification.

[AFFIX NOTARY PUBLIC SEAL]

Signature: _____
Printed Name: _____
Notary Public, State of Florida
My commission expires: _____ Serial No if any: _____



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Good Neighbor Notice

PUBLIC HEARING BY HISTORIC PRESERVATION COMMISSION

HPC _____

DESCRIPTION OF REQUEST: _____

PROPERTY OWNER/AUTHORIZED AGENT: _____

ADDRESS & LEGAL DESCRIPTION OF PROPERTY: _____

Please be advised that the **HISTORIC PRESERVATION COMMISSION** of the City of Tampa will hold a public hearing on **Tuesday, (date) _____, 9:00 AM, at Old City Hall, 315 E. Kennedy Boulevard, City Council Chambers, 3rd Floor, Tampa, FL 33602.**

At such hearing, all parties in interest may appear and be heard as to any and all matters pertinent to the proposed designation. Written comments must be received no later than 24 hours prior to the scheduled meeting to be distributed to the Commission members and to be included in the official meeting record. Submit written comments by mail to Architectural Review & Historic Preservation, 1400 N. Boulevard, Tampa, FL 33607, or by e-mail to Beverly.Jewesak@tampagov.net. For further information regarding this application or to check the postponement or cancellation status of the public hearing, please contact the HPC staff at (813) 274-3100, Option 3.

Please contact me at **(phone) _____** should you have any questions concerning this petition.

Sincerely,

Applicant Name (**Owner/Authorized Agent**) Signature Date

In accordance with the Americans with Disabilities Act (“ADA”) and Section 286.26, Florida Statutes, persons with disabilities needing a reasonable accommodation to participate in this public hearing or meeting should contact the City of Tampa’s ADA Coordinator at least 48 hours prior to the proceeding. The ADA Coordinator may be contacted via phone at 813-274-3964, email at TampaADA@tampagov.net, or by submitting an ADA - Accommodations Request form available online at <https://tampagov.net/ADARquest>.



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Affidavit of Compliance Attesting to Notification

(NAME OF ALL PROPERTY OWNERS), being first duly sworn, depose(s) and say(s):

1. That (I am/we are) the owner(s) and record title holder(s) of the following described property:
(ADDRESS OR GENERAL LOCATION) _____

2. That this property is the property for which a request is being made in **HPC**_____.
3. That the required mailed notice was sent by **Certificate of Mailing** through the United States Post Office on **(date)**_____, not less than thirty (30) calendar days prior to the Historic Preservation Commission Public Hearing, to **(a)** the property owner, if the applicant is not the property owner, and **(b)** each owner of real property located within two hundred fifty (250) feet of the subject property in all directions from the subject property line, including roads or streets, as listed in the most current ad valorem tax rolls certified by the Hillsborough County Property Appraiser; and **(c)** to all participating organizations registered in the neighborhood area in which the subject property is located, as set forth in City of Tampa Code of Ordinances Sec. 27-149(c).
4. That the required sign(s) (was/were) posted on or near the frontage of the subject property, adjacent to and visible from the street or public right of way, and not within a building or obstructed by any site feature, not less than thirty (30) calendar days and not more than sixty (60) calendar days prior to the Historic Preservation Commission Public Hearing.
5. Attached and made part of this Affidavit are **(a)** a copy of the mailed Good Neighbor Notice letter; **(b)** the Certificate of Mailing; **(c)** the current certified ad valorem tax rolls, produced not more than ninety (90) calendar days prior to the date of submittal of this Affidavit, used for notice; **(d)** the list of participating organizations provided mailed notice, including the mailing address and the authorized representative; and **(e)** two (2) photographs of each posted sign: one that clearly shows the language on the posted sign and one that clearly shows the location where the sign is posted on the subject property.
6. That (I, we), the undersigned authority, hereby certify that the foregoing is true and correct.

APPLICANT **(Owner or Authorized Agent)**

APPLICANT **(Owner or Authorized Agent)**

STATE OF FLORIDA – COUNTY OF HILLSBOROUGH

Sworn to (or affirmed) and subscribed before me, by means of physical presence or online notarization, this _____ day of _____, 20____, by the above named Property Owner(s)/Agent(s). Such person(s) is/are personally known to me or produced a/an _____ state driver license(s)/ID card(s) as identification.

[AFFIX NOTARY PUBLIC SEAL]

Signature: _____
Printed Name: _____
Notary Public, State of Florida
My commission expires: _____ Serial No if any: _____

This affidavit may be submitted electronically to the HPC Administrator.