GOVERNMENT OF THE DISTRICT OF COLUMBIA

HISTORIC PRESERVATION OFFICE



HISTORIC PRESERVATION REVIEW BOARD APPLICATION FOR HISTORIC LANDMARK OR HISTORIC DISTRICT DESIGNATION

6	for: Historic Landmark	Historic District
Amendment of a previous designation		
Please summarize any amendment(s)		
D		
Property name	pecifically identified and described in the n	arrative statements.
Address		
Square and lot number(s)		
Affected Advisory Neighborhood Commiss	sion	
Date of construction Date	ate of major alteration(s)	
Architect(s)	Architectural style(s)	
Original use	Present use	
Property owner		
Legal address of property owner		
NAME OF APPLICANT(S)		
If the applicant is an organization, it must submit evide District of Columbia. A copy of its charter, articles requirement.		
Address/Telephone of applicant(s)		
Name and title of authorized representative	·	
Signature of representative	Date	
Name and telephone of author of application	on	
		Date received
		H.P.O. staff