



TOWN OF WAYNESVILLE

Development Services Department

9 South Main Street

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Waynesville, NC 28786

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www.waynesvillenc.gov

Application for Designation as a Local Historic Landmark

Property Address/Location: _____

Property PIN: _____ Property Zoning District: _____

Owner Name: _____ Owner Phone #: _____

Owner Mailing Address: _____

Detailed description of the property's special significance in terms of its historical, pre-historical, architectural, or cultural importance, and its integrity of design, setting, workmanship, materials, feeling and/or association (attach additional pages if necessary):

I, _____, hereby petition the Historic Preservation Commission to formally designate my property (as identified above) a local historic landmark.

Date: _____