



OFFICE OF COMMUNITY & ECONOMIC DEVELOPMENT

Collaborative solutions for a promising future

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WASHTENAW COUNTY HISTORIC DISTRICT COMMISSION APPLICATION FOR COMMISSION REVIEW

Historic District: _____

Date of Application: _____

Name of Owner: _____
Address: _____
Telephone Number: _____
Other (fax, e-mail, etc.): _____

Name of Applicant: _____
Relation to owner: _____
Address: _____
Telephone Number: _____
Other (fax, e-mail, etc.): _____

Briefly summarize proposed work (continue on back or on separate sheet):

Please submit existing condition photographs, copies of diagrams, construction plans, site maps, product and building specifications, and/or any additional information clarifying the details of the proposed work. Electronic submission of related materials is preferred. If the attachments are not submitted electronically or are bound, please submit 8 copies of each attachment.

Signature(s) of Applicant(s): _____ Date: _____

Remit via email or hardcopy to:

Melinda Schmidt, Historic Preservation Specialist
Office of Community & Economic Development
Washtenaw County Government
415 W. Michigan Avenue - P.O. Box 915
Ypsilanti, Michigan 48197
(734)544-2954 voice
schmidt@washtenaw.org

For office use only:

Date application received: _____

_____ Complete; _____ Incomplete (items needed listed on reverse side)

Notification of incomplete application: _____

Receipt of completed application: _____

Date application reviewed: _____

Outcome: ___ Approve; ___ Approve w/changes; ___ Notice to proceed; ___ Denial

Copy to: _____ Owner _____ Applicant _____ Township

Comments: