

# CECIL COUNTY HISTORIC DISTRICT NOMINATION FORM

*Note:* Any property being nominated may be an individual building, site, structure, or object. Alternatively, it may be a district consisting of numerous buildings, sites, structures, or objects. A property owner has the ability to nominate all or part of his or her property.

1. Name of Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Address of Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Tax Map (if known): \_\_\_\_\_ Parcel Number(s) (if known): \_\_\_\_\_

4. Name, address, and contact information (i.e. telephone number, e-mail, etc) for all property owners: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Description of property proposed to be within the district: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Please provide a map showing the location of the proposed district (if available).

7. Please provide photographs showing important structures or features present on the property.

8. To the best of your knowledge, has this property been listed or nominated to:

- \_\_\_\_\_ National Register of Historic Places?
- \_\_\_\_\_ Maryland Inventory of Historic Properties?
- \_\_\_\_\_ Any other historic or preservation organization?

9. Please attach a brief statement, describing the property, its historical significance, and the reason it should be designated as a Cecil County Historic District. Please note if the property or buildings thereon have any special historical, archeological, or architectural significance.

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10. Please have all owners of record sign and date the application.

A. Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_

B. Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_

C. Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_

***Office of Planning & Zoning staff (410-996-5220) is willing and able to assist applicants in completing this form***