## FLORISSANT LANDMARK AND HISTORIC DISTRICT COMMISSION APPLICATION



City Of Florissant – Public Works 314-839-7648

Application is hereby made to the Public works Office at the City of Florissant, Missouri, to appear before the Landmark And Historic District Commission

## **Please Print or Type The Following Information**

Property Address:		Zoning:
Property Owner's Name:		Phone #:
Property Owner's Address:		
Business Owner's Name:: Enter legal name of business such as	s; individual, corporation, partner	Phone #:ship or LLC
DBA (Doing Business As):		Phone #::
Consent Of Property Owner: YES	NO	
Authorized Agents Name:		Phone #:
Agents Address:		
Request:		
State complete request (print or type only).		
Applicant's Signature	Date	e
Ol	FFICE USE ONLY	
Received by:Date:	Staff Remarks:	
	COMMISSION ACTION TAKEN	
DATE APPLICATION REVIEWED		
SIGNATURE OF STAFF WHO REVIEWED APPLICATION		

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