LOCAL HISTORIC DISTRICT DESIGNATION VERIFICATION FORM

1. RESOURCE INFORMATION

Address:
Street ..........................................................
City ................................................. County ................. Zip .........

2. OWNER(s) OF RESOURCE

Name A) ..........................................................
Signature A) ..........................................................
Address: Street ..........................................................
City ................................................. County ................. Zip .........

Name B) ..........................................................
Signature B) ..........................................................
Address: Street ..........................................................
City ................................................. County ................. Zip .........

3. ATTACHMENT

☐ Attach a copy of the Historic District Study Committee Report that designates this resource as contributing to a Local Historic District.

4. DECLARATION – Must be completed by an official representative of the local unit of government.

Name of local historic district ..........................................................
Year established ..........................................................
Name/title of official representative ..........................................................
Address of local unit of government:
Street ..........................................................
City ................................................. County ................. Zip .........

I hereby attest that the information provided is, to the best of my knowledge, correct, and that the above-named resource is located within the boundaries of, and is a contributing resource in, a local historic district as established under Michigan’s Local Historic Districts Act (P.A. 169 of 1970, as amended).

Signature of official representative ..........................................................
Date ..........................................................