

## PRESERVATION EASEMENT REQUEST FOR ALTERATION FORM

PROPERTY	
Address:City:	
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OWNER	
Owner:	
Address (if different than subject property):	
	Email:
Signature:	
ARCHITECT/ENGINEER	
Name:	
Company:	
Address:	
Daytime Phone:	_ Email:
Contractor	
Name:	
Company:	
Address:	
Daytime Phone:	_ Email:
Scope of work Please provide a detailed description of the proposed work.  Landmarks Illinois uses the Secretary of the Interior's Standards for Rehabilitation when reviewing proposed alterations to easement properties. It is recommended that the applicant review the Standards prior to submitting this form at: www.nps.gov/tps/standards/four-treatments/treatment-rehabilitation.htm.  SUBMITTAL Email this form with supporting documents to germanns@lpci.org.  € Scope of work  € Sketches and/or architectural drawings, including elevations, site plans, and floor plans as appropriate  € Specifications of all proposed materials  € Documentation regarding the historic or original condition of the building if available  € Photographs of the existing conditions  € Historic Photographs if available  Whenever possible, email supporting documents in .pdf format and photos in .jpeg digital format.	
Proposed alterations are reviewed by Landmarks Illinois' Easement Committee at their monthly meeting. No work may be initiated prior to receiving the written approval from Landmarks Illinois. Approval by Landmarks Illinois does not relieve the owner of responsibility to obtain all necessary building permits and /or approvals from all applicable local government agencies.	
LANDMARKS ILLINOIS USE ONLY Decision: Reviewed by:	Decision Date: