**City of Apalachicola & Apalachicola Main Street**

**Historic Marker Application**

(Please print or type)

|  |  |
| --- | --- |
| Date: |  |
| Name of Applicant: |  |
| Address of Applicant: |  |
|  |  |
| Phone: |  |
| Email: |  |

**Background Information for Historic Marker Property**

|  |  |
| --- | --- |
| Address of property: |  |
|  |  |
| Construction date of property: |  |
| Name of architect/builder (if available): |  |
|  |
| Name of significant person(s) associated with property: |
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|  |
|  |
| Name of significant event(s) associated with property: |
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| Significant or outstanding interior details (i.e. original mantel, cornice, ceiling medallion, etc.): |
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| Information about significance of property (attach additional sheet if necessary): |
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|  |
| Source of information (attach copies if possible): |  |
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|  |

*Please fill out and bring application to the Main Street office inside City Hall at 1 Avenue E, or email to awest@apalachicolamainstreet.org.*