



CITY OF ASTORIA

Founded 1811 • Incorporated 1856

COMMUNITY DEVELOPMENT

HP _____

**APPLICATION FOR HISTORIC LANDMARK PLAQUE
TO BE DISPLAYED ON HISTORIC STRUCTURE**

Historic Property Address: _____

Property Owner's Name: _____

Mailing Address: _____

Phone: _____ 2nd Phone: _____

Email: _____

AGREEMENT:

1. The plaque remains the property of the City of Astoria and shall be returned at the request of the Historic Preservation Officer for any reason.
2. Property owner will install the plaque using stainless steel screws.
3. Replacement fee of \$10.00 may be charged if the plaque is lost or damaged. Please protect the plaque when re-painting the building. City will bear the cost of replacements due to vandalism. Property owner will notify the Historic Preservation Officer immediately when the plaque is lost or damaged.
4. The undersigned property owner agrees to indemnify and hold the City of Astoria and its employees and volunteers harmless from any and all claims and rights for personal injury or property damage incurred by property owner or third parties arising out of the use, maintenance, placement, and installation of such signs.

Property Owner Signature: _____

Date: _____

<i>For office use only:</i>			
Application Approved:		Plaque Issued:	