

CITY OF STRATFORD

HERITAGE STRATFORD

PROPOSED HERITAGE BUILDING DESIGNATION APPLICATION

OWNERS NAME: _____

OWNERS ADDRESS: _____

Street Name and Number / Apartment Number

City Province Postal Code

CONTACT PHONE NO: _____

Home Business

PROPOSED HERITAGE
PROPERTY ADDRESS: _____
Street Name & Number

City Province Postal Code

OWNERS REASONS
FOR DESIGNATION: _____

OWNERS SIGNATURE: _____

Date of Application

If you have any historical data, photos or background information please include with this application

FOR HERITAGE STRATFORD USE	
Owner Contacted On: _____	By: _____ Proceed: YES NO
Comments: _____	
Heritage Criteria YES	Approved by: _____ Date: _____
NO	Reasons application declined and letter to applicant attached
Approved by Heritage Stratford _____	Date _____
3/97	Chair of Heritage Stratford