

# Nominating Application & Application for Reclassification or Removal of Historic Resource

Application Date		Total Number of Pages (including Attachments)	
<b><u>Property Information</u></b>			
Street Address		Current Use	
		<input type="checkbox"/> Residential (R) <input type="checkbox"/> Industrial (I)	
Parcel Number	Zoning District	<input type="checkbox"/> Commercial (C) <input type="checkbox"/> Other (O)	
<b>List the Name and Address of Each Owner of the Property</b> (attach additional Sheets as required)			
Name		Address	
Name		Address	
<b>If the Property is subject to any Easement(s)</b> (other than public rights of way or utility easements adjacent to a public right of way), attach a separate sheet describing the extent of such Easement(s), and listing those holding such Easement(s) with their name and address.			<input type="checkbox"/> None <input type="checkbox"/> List Attached
<b>If the Property is the subject of any Lease, Life Estate, or Future Interest</b> , attach a separate sheet describing the nature of such interest(s) and listing those holding such interest(s) with their name and address.			<input type="checkbox"/> None <input type="checkbox"/> List Attached
<b><u>Applicant Information</u></b>			
Nomination or Application for Reclassification or Removal By:			
<input type="checkbox"/> Malvern Historical Commission <input type="checkbox"/> Malvern Borough Council <input type="checkbox"/> Property Owner (fill in contact details below)			
First Name		Last Name or Business Name	Phone Number
Street Address		City	State      ZIP
<b><u>Historic Resource Classification Information</u></b>			
<b>Current</b> Historic Resource Classification <input type="checkbox"/> <b>Not Classified* (See Below)</b> <input type="checkbox"/> <b>Tier III</b> <input type="checkbox"/> <b>Tier II</b> <input type="checkbox"/> <b>Tier I</b>		<b>Proposed</b> Historic Resource Classification <input type="checkbox"/> <b>None (Remove from Official List)</b> <input type="checkbox"/> <b>Tier III</b> <input type="checkbox"/> <b>Tier II</b> <input type="checkbox"/> <b>Tier I (Attach Official Documentation)</b>	
		Date (or Year) When Property Was First Added to the Official List of Historic Resources	
<b>* If you are Nominating a Property to be <u>ADDED</u> the Official List, attach Recent Photographs of the Property, a site plan of contributing elements and noncontributing elements.</b>			

**Criteria For Designation**  
*See Malvern Zoning Ordinance §2301D.3.*

**If you answer “Yes” to any of the following questions, please attach a separate sheet with relevant documentation, evidence, or other details.**

a.	Does the Property have significant character, interest or value as part of the development, heritage or cultural characteristics of the Borough, Chester County, region, commonwealth, or nation?	<input type="checkbox"/> Yes
b.	Is the Property associated with the life of a person or history of an organization of importance to the history of the Borough, Chester County, region, commonwealth or nation?	<input type="checkbox"/> Yes
c.	Is the Property associated with an event of importance to the history of the Borough, Chester County, region, commonwealth or nation?	<input type="checkbox"/> Yes
d.	Does the Property embody distinguishing characteristics of an architectural style, vernacular type, or feat of engineering?	<input type="checkbox"/> Yes
e.	Is the Property a noteworthy work of a designer, architect, landscape architect, designer, or engineer whose work has significantly influenced the historical, architectural, economic, social or cultural development of the Borough, Chester County, region, commonwealth or nation?	<input type="checkbox"/> Yes
f.	Does the Property Contain elements of design, detail, materials or craftsmanship which represent a significant innovation?	<input type="checkbox"/> Yes
g.	Is the Property part of or related to a commercial center, park, community or other distinctive area which should be preserved according to an historic, cultural or architectural motif?	<input type="checkbox"/> Yes
h.	Owing to its unique location or singular physical characteristic, does the Property represent an established and familiar visual feature of the neighborhood, community or Borough?	<input type="checkbox"/> Yes
i.	Has the Property yielded, or is the Property likely to yield, information important in prehistory or history?	<input type="checkbox"/> Yes
j.	Does the Property exemplify the cultural, political, economic, social or historical heritage of the community?	<input type="checkbox"/> Yes
k.	In the case of structures, objects, or monuments: has the structure, object or monument existed in its current form or configuration for fifty (50) years or more?	<input type="checkbox"/> Yes

**If you are requesting that the Property be REMOVED COMPLETELY from the Official List of Historic Resources, please briefly explain why. Attach additional sheets as necessary.**

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# Sworn Statement

## AFFIDAVIT

Before me, the undersigned Notary, \_\_\_\_\_ (Notary Name), on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, personally appeared \_\_\_\_\_ (Name of Person Signing Application, "Affiant"), known to me to be a credible person and of lawful age, who being by me first duly sworn on his/her oath, and under penalty of perjury, deposes and says:

1. The Affiant is authorized to make this Nomination of, or Application for Reclassification or Removal of, a Historic Resource; and
2. The facts set forth herein are true and correct to be best of the Affiant's knowledge and belief, and that the Applicant named herein expects to be able to prove the same at any hearing hereof; and
3. The Application contains a correct and complete list of the Property's Owner(s); and
4. The Application contains a correct and complete list of relevant Easements and each Easement's holder, or the Application states to the Affiant's knowledge and belief that no such Easement(s) exist; and
5. The Application contains a correct and complete list of any and all leasehold estate(s), life estate(s), and/or future interest(s) (collectively "Interests") and the holder of each Interest, or the Application states to the Affiant's knowledge and belief that no such Interests exist.

Sworn and Subscribed before me on the date first written above.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Name of Affiant (Print)

\_\_\_\_\_  
Notary Public  
My Commission Expires:

(SEAL)