Passaic County Historic Marker Application

PROPERTY INFORMATION

Address: ________________________________

_____________________________________

______________________________

Block No. ________ Lot No. __________

Historic Name (if known):

______________________________

Type of building/location (please check one):

- o Commercial
- o Industrial
- o Mixed Use
- o Residential
- o Public
- o Religious
- o Park

Is this building currently occupied / in use?

- o Yes
- o No

What is the original or pervious use of the property? (50 years ago or more):

_____________________________________

_____________________________________

Is the property listed on the State of National Register of Historic Places? If so, which register and what year was the site listed?

_____________________________________

_____________________________________

Suggested Marker Title:

_____________________________________

_____________________________________

Suggested Location for Marker Placement:

_____________________________________

_____________________________________
APPLICANT INFORMATION

Name: _________________________________________________________________

Company / Group: ______________________________________________________

Address: ______________________________________________________________

_____________________________________________________________________

Email: ___________________________ Phone: _____________________________

_____________________________________________________________________

SPONSOR INFORMATION

** A sponsor is defined here as the entity or individual who is funding the marker. **

Name: _________________________________________________________________

Company / Group: ______________________________________________________

Address: ______________________________________________________________

_____________________________________________________________________

Email: ___________________________ Phone: _____________________________

_____________________________________________________________________

Will you be apply for a grant from the Corridor Enhancement Program?

○ Yes
○ No

If yes, how much will you be applying for? ________________________________

_____________________________________________________________________


DESCRIPTION

Briefly describe the historic significance of the location, occasion or event being commemorated. Use additional pages if necessary.

RESOURCES

To support the accuracy of the facts contained within the suggested script, please provide a minimum of three historic references including the following information: author, title, publisher and date of publication. Please photocopy and attach each source and submit documentation with this application.

MARKER SCRIPT

Please submit a proposed script for your marker. The marker script CANNOT EXCEED 150 words. Use additional pages if necessary.

When completed, this application and any supporting documentation should be sent to:

Department of Cultural & Historic Affairs
Dey Mansion
199 Totowa Road
Wayne, NJ 07470

If you have any questions please contact the Department at (973) 706 – 6640 or kellyr@PassaicCountyNJ.org