

# VILLAGE OF FRANKFORT HISTORIC PRESERVATION COMMISSION

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## DESIGN REVIEW APPLICATION

Site Address: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Type of Application:  
Construction

Repair/Rehabilitation

New

Demolition

Sign

Relocation of Structure

Paint

Windows

Doors

Roof

Other \_\_\_\_\_

Scope of Work: (include additional attachments if necessary)

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