

Village of Frankfort
432 W. Nebraska, Frankfort, IL
815-469-2177

Historic Preservation Commission
Historic Landmark Nomination Form

1. PROPERTY INFORMATION

Legal description of property: _____

Common street address: _____

Name and address of owner: _____

PIN: _____

Current zoning: _____

Property Classification:

Building Structure Object Site Historic District Landscape

Original construction date/period of significance (this can be a single date or range)

Please attach a map indicating the property location and boundaries of the property and/or landmark location to be nominated. Attach photographs which show sufficient detail, important features, and significant structures of the property to be nominated. Historic photographs of the property to be nominated are encouraged. If possible, **please also provide photographs in digital format.**

2. EXISTING RECOGNITION INFORMATION

Is the property and/or landmark to be nominated, or any part of it, listed on or nominated to the Village of Frankfort, Illinois, or the National Register of Historic Places? Yes No

If yes, which of the following: VOF Illinois National Register

3. NOMINATION CRITERIA

Please indicate which of the following criteria apply to the nominated property. (Check all that apply)

Property has significant value as part of the historic, heritage or cultural characteristics of the Village of Frankfort, Will County, the State of Illinois or the U.S. A.

The property identifies with a person or persons who significantly contributed to the development of the Village of Frankfort, Will County, the State of Illinois or the U.S.A.

The property is representative of the distinguishing characteristics of architecture inherently valuable for the study of a period, type, method of construction or use of indigenous materials.

Property is identified with the work of a master builder, designer, architect or artist whose individual work has influenced the development of the Village of Frankfort, Will County, the State of Illinois or the U.S. A.

Property's unique location or singular physical characteristic make it an established or familiar feature within the Village of Frankfort.

Structure is a particularly fine or unique example of a utilitarian structure with a high level of integrity, architectural significance, or historic importance.

Property has yielded or may be likely to yield, information important in history or prehistory.

Please attach a statement describing the property, its historic significance, and the reasons why it should be designated as an historic landmark. Please include a list of the sources of information and bibliographic references.

4. APPLICANT INFORMATION

Name: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

Fax Number: _____

Signature: _____

Attach additional signature sheets if more than one person/family is making application.

**ADDITIONAL INFORMATION AND PHOTOGRAPHS TO SUPPORT THIS NOMINATION MAY
BE REQUIRED BY THE FRANKFORT HISTORIC PRESERVATION COMMISSION IF THE
PROPERTY IS FOUND TO HAVE MERIT FOR CONSIDERATION FOR
LANDMARK DESIGNATION**

5. PROPERTY OWNERSHIP INFORMATION

Include the name, address, and telephone number of all legal owners of record of the nominated property. If the property has more than two (2) owners, use Attachment 3.

PLEASE NOTE: When a nomination incorporates more than one property or when nominating a district, Attachment 1-3 must be completed and submitted with this application.

Name of Legal Owner (1): _____

Address: _____

Telephone Number: _____

Name of Legal Owner (2): _____

Address: _____

Telephone Number: _____

Has the applicant notified the property owner(s) that this property is being recommended for landmark designation to the Village of Frankfort Historic Preservation Commission?

Yes No

If yes, was notification made by the applicant in person? by telephone? in writing?

Has the property owner(s) indicated support or lack of support for nomination of this property?

Support Lack of support

Document Number _____

6. PROPERTY STATUS INFORMATION

At the time of the application, is the nominated property:

___ threatened by demolition or neglect *(Please provide detailed explanation.)*

___ considered for new development *(Please provide detailed explanation.)*

___ likely to remain in its present condition?

HPC STAFF USE ONLY

Document Number: _____

Application complete? ___ Yes ___ No

Date Received: _____

Staff Acknowledgement ??(is this property owner notified?)

Commission Meeting date: _____

Public Meeting date: _____

Action: **Landmark Status**
___ Approved ___ Denied

Property owner notified of decision
___ Yes ___ No

Recommendation to the Village Board
___ Approved ___ Denied

Notifications if approved:

___ Community Development Department

___ Building Inspector

___ Village Clerk

___ County Recorder of Deeds

Please note: Completion of Attachment 2 is necessary for historic district nominations only.

HISTORIC LANDMARK NOMINATION FORM
ATTACHMENT 2

Name and Address of property listed on or nominated to the Illinois or National Register of Historic places within proposed boundaries of a district nomination.

Complete this attachment form when nominating a district and when the answer is “Yes” under the section entitled “Existing Recognition Information”

In the spaces provided below, please record the name and address of each property within the proposed district or landscape nomination which is currently listed or nominated to the Village of Frankfort, Illinois, or National Register of Historic Places. For each property listed, please check the place which indicates the appropriate register listing. (If necessary, please attach additional sheets.)

Name: _____

Address: _____

<input type="checkbox"/> National Register
<input type="checkbox"/> Illinois
<input type="checkbox"/> VOF

Name: _____

Address: _____

<input type="checkbox"/> National Register
<input type="checkbox"/> Illinois
<input type="checkbox"/> VOF

Name: _____

Address: _____

<input type="checkbox"/> National Register
<input type="checkbox"/> Illinois
<input type="checkbox"/> VOF

Name: _____

Address: _____

<input type="checkbox"/> National Register
<input type="checkbox"/> Illinois
<input type="checkbox"/> VOF

Village of Frankfort Landmark Nomination Form (cont'd.)
Document Number _____

Please note: Completion of Attachment 3 is necessary for historic district nominations only.

HISTORIC LANDMARK NOMINATION FORM
ATTACHMENT 3

Names, addresses, and telephone numbers of property owners within the proposed district or landscape.
Complete this attachment when nominating a district.

In the spaces provided below, please record the requested information for each property owner within the proposed district or landscape. (If necessary, please attach additional sheets.)

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____

Name: _____

Address: _____
