

**Application for Nomination of
Local Landmark Designation
for Monticello, Illinois**

Name: _____

Mailing Address: _____

City, State & Zip: _____

Phone Number: _____

Common Street Address of Property: _____

Legal Description of Property:

Description of Property: _____

Reasons for Proposed Designation: _____

List of Significant exterior architectural features that should be protected :

Names and addresses of adjacent property owners:

Please provide documentation showing that the property owner has been notified or consents to the application for designation:

Please provide a site plan and photography of the landmark.

Applicant Signature: _____

Please Return the Completed Form to: Monticello Historic Preservation
210 N. Hamilton
P.O. Box 437
Monticello, IL 61856