



**CITY OF TUSTIN MILLS ACT PROGRAM**  
*Historical Property Preservation Agreement Application*

**FOR OFFICE USE ONLY**

Case No. \_\_\_\_\_

Date Rcvd. \_\_\_\_\_

Rcvd. By \_\_\_\_\_

Fees Paid \_\_\_\_\_

Receipt # \_\_\_\_\_

**LEGAL OWNER INFORMATION**

Legal Owner Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax \_\_\_\_\_

**HISTORIC PROPERTY INFORMATION**

Historic Property Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Assessor's Parcel Number: \_\_\_\_\_

Historic Structure Name (if any): \_\_\_\_\_

Please attach a copy of the legal description.

**POTENTIAL STRUCTURE/PROPERTY IMPROVEMENT TIMELINE**

Please summarize all property improvements planned for the next ten years:

Year	Improvement
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Property improvements continued...

**Year**

**Improvement**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Owner(s) Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_  
(Must be Notarized)

\_\_\_\_\_ Date: \_\_\_\_\_  
(Must be Notarized)

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*This portion to be completed by the City*

Historic Designation:  Local  State  National  
Listing in Historical Survey:  A  B  C  
Location:  Within District  Outside District