



Los Angeles County  
Department of Regional Planning

Planning for the Challenges Ahead



**Mill Act Historical Property Contract Application**

Mills Act Historical Property Contract applications are only accepted during certain times of the year. See <http://planning.lacounty.gov/preservation/program> for additional information. Property owners should seek financial and/or legal advice before entering into a Mills Act contract.

*THIS SECTION - STAFF USE ONLY*

Project No. \_\_\_\_\_ Permit No. \_\_\_\_\_

Supv. Dist: 1 2 3 4 5      Zoned District: \_\_\_\_\_

Outstanding DRP or Building & Safety enforcement cases?     Yes     No

Property taxes paid to date?     Yes     No

**1. Subject Property (Sujeto Propiedad)**

ASSESSOR'S PARCEL NUMBER(S)

SUBJECT PROPERTY ADDRESS OR SITE LOCATION

LEGAL DESCRIPTION (Attach additional sheets, if necessary, or copy of grant deed)

LAND USE:  Single-family     Two-family     Other:

DESIGNATION

Register      Resource Number/Name

National: \_\_\_\_\_

State: \_\_\_\_\_

County: \_\_\_\_\_

Resource Type:  Individual or  District

REQUIRED APPLICATION ITEMS

- Grant Deed if ownership does not match County records. Ownership on the deed must correspond exactly with the ownership listed on the application.
- Ownership Disclosure if property is owned by an LLC, corporation, partnership, or trust. The disclosure must reveal the agent for service of process of an officer of the ownership entity. The disclosure must list the name and addresses of the principal owners (25% or greater) and attach a copy of the current corporate articles, partnership agreement, or trust document, as applicable.
- Notarized Letter of Authorization (LOA) from the property owner if anyone other than the owner signs the application. The authorized person (agent, applicant) on the LOA must correspond with the signature on the application.
- Printed color photographs of the building interior (all rooms and historic features) and exterior (all elevations, historic accessory buildings and features). Include photos of areas referenced in the Work Program. Each printed photo must be labeled with the building address, direction of view and Work Program item number (if applicable).
- Site Plan drawn to scale with locations of all buildings on site (include property lines, street names, north arrow & dimensions).
- Proposed Work Program. See Proposed Work Program Instructions.
- Narrative and Priority Criteria Statements. See Mills Act Historical Property Application Supplemental Questionnaire.
- Copy of the most recent property tax bill.
- CD of PDFs of all application materials.

**2. Owner(s) (Dueño/a Registrado)**

NAME:		PHONE:
ADDRESS:		FAX:
CITY / STATE:	ZIP:	E-MAIL:

**3. Applicant (Solicitante) If different from owner**

NAME:		PHONE:
ADDRESS:		FAX:
CITY / STATE:	ZIP:	E-MAIL:

**4. Agent (Agente) If different from owner / applicant**

NAME:		PHONE:
ADDRESS:		FAX:
CITY / STATE:	ZIP:	E-MAIL:

**5. Contact (Contacto)**

Who is the primary contact regarding this application? Check one:  Owner  Applicant  Agent

**6. Owner / Applicant Certification (Certificación del Solicitante, Agente o Dueño/a)**

By my signature below, I hereby understand and certify the following:

1. The burden is on the applicant to substantiate the request.
2. There is no guarantee - expressed or implied - that a contract will be granted. I understand that each application must be carefully evaluated and after the evaluation has been conducted, that staff's recommendation or decision may be revised to a different position taken in any preliminary discussions.
3. After further evaluation, additional information may be required.
4. If my application is denied, there is no refund of fees paid.
5. Submitting inaccurate or incomplete information may result in delays or denial of my application.
6. The information provided in this application, including attachments, is accurate and correct to the best of my knowledge.
7. I have read and understand the foregoing and agree to the submittal of this application.

SIGNATURE (BLUE INK):	DATE:
PRINT NAME:	CHECK ONE: <input type="checkbox"/> Owner <input type="checkbox"/> Applicant

**7. Lobbyist Statement (Información de un Grupo de Presión)**

The Los Angeles County Lobbyist Ordinance, effective May 7, 1993, requires certification that each person who applies for a County permit is familiar with the requirements or Ordinance No. 93-0031 (Lobbyist Ordinance), and that all persons acting on behalf of the applicant have complied and will continue to comply with the requirements of said Ordinance through the application process. By my signature below, I hereby certify that I am familiar with the requirements of Ordinance No. 93-0031 and understand that making such a certification, and compliance with this ordinance, shall be conditions precedent to granting the permit requested, license, contract or franchise.

SIGNATURE (BLUE INK):	DATE:
PRINT NAME:	CHECK ONE: <input type="checkbox"/> Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Agent

LOBBYIST PERMIT NO., IF APPLICABLE: \_\_\_\_\_