



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

- Mills Act application fee.
- Proof of Ownership
 - 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 and digital (CD) 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 and direction of view.
 - Site Plan drawn to scale with locations of all buildings on site (include property lines, street names, north arrow & dimensions).
 - Completed Work Program Form that identifies proposed rehabilitation, restoration and maintenance plan.
 - Narrative Statement demonstrating how a contract will result in the preservation, restoration, or rehabilitation of the property. Please limit to 500 words or less.
 - Copy of the most recent property tax bill.
 - Priority Criteria Statement if determined necessary by staff.

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: _____