



Resilient Environment Department

**URBAN PLANNING DIVISION · Historic Preservation Program**

1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-9731 · Broward.org/History

OFFICE USE ONLY
CTD No. _____

## Application for Certificate to Dig Archaeological, Paleontological or Historic Resource Site or Zone

All applications must include:

- A current color map of the property scaled at 1 inch equal to 300 feet (*other scales may be accepted*).
- Color photographs of all proposed work areas.
- Property survey or site plan.
- One (1) set of project plans, indicating any areas subject to land clearing, trenching, excavating or digging.

This application will not be processed for review until all required information is received, accepted and determined “complete” by the Historic Preservation Officer. **All applicants should schedule a pre-application meeting with the Historic Preservation Officer before submitting this form.**

Property Information			
Folio No.			
Address	City	State	Zip
Site Designation Name ( <i>if applicable</i> )			
District Designation Name ( <i>if applicable</i> )			

Property Owner Information			
Property Owner(s)			
Address	City	State	Zip
Phone	Mobile Phone	Email	

## Applicant Information

Applicant is the:  Owner  Contractor  Architect  Legal Agent/Attorney  Other

Describe relationship to owner if "other" is checked:

Name (if different from owner)

Address

City

State

Zip

Phone

Mobile Phone

Email

## Project Type

Check all that apply:

Utilities  Tree Removal  New Construction  Swimming Pool  Minor Landscaping  Irrigation

Filling  Demolition of a Historic Resource (100+ years old)  Relocation of a Historic Resource (100+ years old)

Other:

## Project Description

Describe in detail the project, including the nature of any proposed ground disturbance/excavation, any new construction or additions, demolitions, removal, replacement of existing materials and any and all other proposed changes or alterations to the property and structure (*attach additional sheet if necessary for complete project description*).

## Owner Certification

I hereby certify, to the best of my knowledge, that the information provided within this application is correct, complete and accurately portrays the proposed project.

\_\_\_\_\_  
**Owner's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant's Signature** *(if other than owner)*

\_\_\_\_\_  
**Date**

**Mail this application and all supporting documents to:**

Broward County Urban Planning Division  
Attention: Broward County Historic Preservation Officer  
1 North University Drive, Box 102  
Plantation, FL 33324

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Questions? Please call (954) 357-9731

**Owner Certification**

This is to certify that I am the owner of the property described on the attached survey and I have authorized the filing of this request. My ownership interest is \_\_\_\_\_ percent.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Print Name

**NOTARY PUBLIC**

**STATE OF FLORIDA**

**COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me, the undersigned Notary Public, by means of

physical presence or  online notification, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_,

by \_\_\_\_\_ who is:

Personally Known to me, or  Produced Identification

Type of identification produced \_\_\_\_\_.

(NOTARY SEAL)

\_\_\_\_\_  
*Signature of Notary Public-State of Florida*

\_\_\_\_\_  
*Name of Notary Typed, Printed or Stamped*