

**City of Elgin Historical Marker Program
Parks & Community Development Department
PRE-APPLICATION FORM**

Type of Elgin Historical Marker Application (circle one)

Event Church Congregation Houses & Buildings Cemeteries

Name of application (ex) Dr. I.B. Nofsinger House

Location - Property must be located with the City limits or Elgin ETJ (extra territorial jurisdiction)

Street address and or specific directions

County, City, State, zip

Owner of marker site

Name _____

Address _____ City/State/Zip _____

Phone _____ Email _____

Sponsor of historical marker application

Name _____

Address _____ City/State/Zip _____

Phone _____ Email _____

Brief description of marker subject (attach pages if necessary)

MARKER INFORMATION

Applicant is Required to purchase the oval Elgin marker. Oval Elgin Historical Marker \$ _____

I the undersigned understand that an oval Elgin marker must be purchased if application is approved.

Signature of Applicant _____ Date _____

Received: Signature of staff _____ Date _____

Story markers are available for optional purchase by applicant. Please contact City staff for information about size and costs.