



City of Flagstaff

Community Development Division

211 W. Aspen Ave
Flagstaff, AZ 86001

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www.flagstaff.az.gov

HPC-G

Date Received 11/3/23		Application to Heritage Preservation for a Historic Signs and Facades Grant		File Number P2-23-00203
Property Owner(s) ROBERT & DOROTHY BEST	Title OWNERS	Phone (928) 774-4788	Email dordibest38@gmail.com	
Mailing Address 909 N. LEROUX ST.		City, State, Zip FLAGSTAFF, ARIZONA 86001		
Applicant ROBERT & DOROTHY BEST	Title OWNERS	Phone (928) 774-4788	Email dordibest38@gmail.com	
Mailing Address 909 N. LEROUX ST.		City, State, Zip FLAGSTAFF, ARIZONA 86001		
Property Interest of Applicant(s) (Owner, contractual interest, or agent) OWNERS				
Site Address 314 W. BIRCH AVE.		City, State, Zip FLAGSTAFF, ARIZONA 86001		
Project Name				
Parcel Number(s) 10011003		Zoning District(s), including Overlays		
Property Information: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Listed individually on the National or Arizona Register of Historic Places? (Name: _____) <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Located in a National Register Historic District? (Name: TOWNSITE) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is a structure on the property considered contributing to the District? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Located in a City of Flagstaff Landmark Overlay? (Name: TOWNSITE) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Has the structure every been inventoried or evaluated for the National Register? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is the structure over 50 years old at the time of application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was all or a portion of the structure built before World War II as housing?				
Note: Applications which are incomplete or not accompanied by the required information will not be accepted.				
Property Owner Signature: Robert J. Best Dorothy Best		Date: 11-1-2023	Applicant Signature: Robert J. Best Dorothy Best	
		Date: 11-1-2023		
For City Use				
Date Filed: _____		HPC Hearing Date: _____		
Fee Receipt #: _____		Amount: _____		Date: _____
Action by HPC: <input type="checkbox"/> Consent Approval by HPO		<input type="checkbox"/> Denied		
<input type="checkbox"/> Approved		<input type="checkbox"/> Continued		
<input type="checkbox"/> Approved with Conditions		Staff Initial: _____ Date: _____		