Sitka Historic Preservation Commission

Coversheet

For Request for Review of Potential Impacts to Heritage Resource(s)

A. Contact Name
   Address __________________________ City __________________________ State ______ Zip _________
   Phone __________________________ Fax __________________________ email ______________________

B. Agency undertaking project: (circle)
   Private City State Federal Department __________________________

C. Date Agency received proposed project: ______________

D. Are Federal funds involved (grants, funding, agency) yes no

E. Are State funds involved (grants, funding, agency) yes no

F. Will the project affect a National Historic Landmark or a site in the National Register
   of Historic Places? (See Appendix A) yes no

G. Is the site listed in the Alaska Heritage Resource Survey inventory? yes no
   If yes, Site Number __________________ Preservation Status __________________
   (refer to AHRS inventory for more information)

H. Is the Project within the Sitka Indian Village or Downtown Sitka yes no

I. Describe the proposed project

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

J. Purpose/Objectives for the undertaking

________________________________________________________________________
________________________________________________________________________

K. Attach:
   • Copy of a map of the proposed project including latitudinal and longitudinal information
   • Property owner information
   • Any other pertinent information

Mail Coversheet and attachments to:
Sitka Historic Preservation Commission
C/O City and Borough of Sitka
100 Lincoln Street
Sitka, Alaska 99835

Notes to Applicant:
   • Review will take place only during regular commission meetings or on an as needed basis
   • The meetings are public and convene the second Wednesday of each month as advertised
   • Review process may take up to 60 days
   • The SHPC reserves the right to request additional information and/or time to review projects

ACTION: ___________________  SIGNED: ___________________________  DATE: ____________