



City of Collinsville
HISTORIC PRESERVATION COMMISSION
Application for Designation as a Landmark

Application No. _____

Date: _____

I. Applicant

A. Applicant's Name: Mississippi Valley Library District

B. Mailing Address: 408 W. Main St

C. Telephone Number: 618-344-1112

D. Please check (X) under which capacity you are filing.

____ 1. The recorded owner(s) of the property, as of _____
(Date)

X 2. Other: () Person () Group
() Association ☒ Governmental Body

(Explain Fully) for
Collinsville Memorial Library Center

II. Property Information

A. Street Address (common address) of property(ies) being considered:

408 West Main St

B. Legal description of property(ies). This maybe obtained from the appropriate Tax Assessor's office. (Attach supplementary sheet if necessary)

See attached

C. Present Use of the property(ies). Library Center

D. ☒ Property Owner Consent Form has been completed and is attached.

III. Submit the following required Landmark Criteria information.

A. Provide a written and signed statement describing the property and setting forth reasons in support of the proposed designation.

B. Provide a list and photographs of significant architectural features of the property.

C. Provide an overall site plan (or aerial photograph) and photographs of the proposed landmark including a front, side and rear elevation drawings or photographs.

() Check here if additional pages or photos are attached and indicate the number of sheets: ____

I hereby affirm that this nomination application and all information submitted with it are true and correct to the best of my knowledge.

Signature of Applicant

Date: 3/21/2016



City of Collinsville
HISTORIC PRESERVATION COMMISSION
Property Owner Consent Form for
Historic Landmark Designation Application

I/We Mississippi Valley Library District are the
lawful owner(s) of record for the property located at 408 W. Main St
which has been submitted for consideration of designation as a Collinsville Historic
Landmark within this application. I/We do hereby grant my/our consent for the submittal
of this application and designation of my/our property as a Collinsville Historic Landmark
if so designated by the Collinsville Historic Preservation Commission and the Collinsville
City Council.

Signature of Owner

Director

(mailing address)

408 W. Main St.
Collinsville, W

3/21/2016

Date

Signature of Owner

(mailing address)

Date

21-33-07

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ADDN
(5)

GUERNSEY

ALLEY

014

012

019

015

(7)

017

018

019

U.S. BUSINESS ROUTE 40

HARROWS

20

PG.

011

012

STREET

026

1.8 Ac (6)

200

024

GROVE

THOR

STREET

STREET

023

024

025

026



"PLAT C"

Collinsville Memorial Library Center

