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|  | | | | New Mexico Official Scenic Historic Marker Program  Application Form | | | | | | | | | | |
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|  | | | | | | | | | | |
| **Name of Marker:** | | | | |  | | | | | | | | | | |
|  | | | | |  | | | | |  | | | | | |
| **County:** | | | | |  | | | | | | | | | | |
|  | | | | |  | | | | |  | | | | | |
| **Review:** | | | | |  | | | | |  | | | | | |
|  | | New Marker | | | | | | | Revised Text | | | | | | |
|  | | Original Text/Replacement Marker | | | | | | | Move of Existing Marker | | | | | | |
|  | | | | | | |  | | |  | | | | | |
| **Text:** | | | | | | |  | | |  | | | | | |
|  | | One-sided | | | | Two-sided | | | | | | | | | |
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|  | | | | | | |  | | |  | | | | | |
| **Suggested Installation Site:** | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **Proposed Text:** | | | | | | | |  | | | **Word Count:** | |  | | |
|  | | | | | | | |  | | | |  |  | | |
|  | Type marker text here (50-80 word limit per side) | | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **Applicant Name:** | |  | | | | |
|  | |  | | |  | |
| **Organization (if applicable):** | |  | | | | |
|  | |  | | |  | |
| **Address:** | |  | | | | |
|  | |  | | |  | |
| **Phone Number:** | |  | **Email:** |  | | |
|  | |  |  |  | | |
| **Researcher/Author:** | |  | | | | |
|  | |  | | |  | |
| **References/Source(s):** | |  | | | | |
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***For HPD Staff:***

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CPRC Meeting Date:** | | |  | | | | **Text Approved by CPRC Date:** | | | |  | |
|  | | | |  | | |  | | | | |  |
| **CPRC/Staff Comments:** | | | | | | | |  | | | | |
|  | | | | |  | | | | |  | | |
|  | Type comments here | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| **NMDOT District:** | |  | | | | **NMDOT Highway:** | | |  | | | | | |
| **For Referral to:** |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| **Previous Title & Text:** | | | |  | | | | | | | | |
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| Type previous text here | | | | | | | | | | | | |

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Send this form and any additional supporting documentation via email to [matt.saionz@dca.nm.gov](mailto:matt.saionz@dca.nm.gov).