

**HISTORIC MARKER APPLICATION**

Name of Site/Event/Person to be commemorated by the proposed marker:

---

Location for proposed marker:

---

Co-sponsoring Organization/Individuals:

---

Date: \_\_\_\_\_

Historical Significance (Please provide a brief summary in the space below. Attach other supporting information, such as citations from books or other research materials as necessary)

---

---

---

---

---

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Submit to:  
Historic Columbus  
Justin Krieg  
PO Box 5312  
Columbus, GA 31906  
Justin@historiccolumbus.com**