

CERTIFICATE OF APPROPRIATENESS APPLICATION

This form must be turned in 15 days prior to the next scheduled meeting before the H.P.C. Committee can consider any requests for approval of any changes affecting the exterior appearance or demo of any building located within a designated local historic district in the City of Bainbridge.

PROPERTY ADDRESS	
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APPLICANT	NAME:	PHONE:
	MAILING ADDRESS:	
	CITY:	STATE:

PROPERTY OWNER	NAME:	PHONE:
	MAILING ADDRESS:	
	<input type="checkbox"/> Check here if same as Applicant	
CITY:	STATE:	ZIP:

OCCUPANT	NAME:	PHONE:
	MAILING ADDRESS:	
	<input type="checkbox"/> Check here if same as Applicant	
CITY:	STATE:	ZIP:

Nature of proposed work to be done (check all that apply)

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Remodeling/Addition | <input type="checkbox"/> New Construction | <input type="checkbox"/> Moving Building | <input type="checkbox"/> Awnings |
| <input type="checkbox"/> Siding Alteration/Change | <input type="checkbox"/> Demolition | <input type="checkbox"/> Sign | <input type="checkbox"/> Roof Alteration |
| <input type="checkbox"/> Door/Window Alteration | <input type="checkbox"/> Shutters Addition/Change | <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Other _____ | | | |

Describe proposed work in detail (additional pages may be attached, if necessary) _____

Once the C.O.A. has been approved by the Commission, the applicant has 15 days to obtain a building permit (if applicable) and 45 days to begin construction

Applicant's Signature _____	Date _____
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FOR OFFICE USE ONLY	APPLICATION FEES	FOR OFFICE USE ONLY												
Classification: _____ Application #: _____ Date Received: _____ Map & Parcel #: _____	\$25.00 Application Fee for following: Remodeling/Addition Awnings New Construction Roof Alteration Moving Building Accessory Structure Siding Alteration/Change Fence Sign Door/Window Alteration Shutters Addition/Change Other	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">ACTION</td> <td style="text-align: center;">DATE</td> </tr> <tr> <td><input type="checkbox"/> Approved</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Approved w/ Conditions</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Denied</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Withdrawn</td> <td>_____</td> </tr> <tr> <td><input type="checkbox"/> Staff Approval</td> <td>_____</td> </tr> </table>	ACTION	DATE	<input type="checkbox"/> Approved	_____	<input type="checkbox"/> Approved w/ Conditions	_____	<input type="checkbox"/> Denied	_____	<input type="checkbox"/> Withdrawn	_____	<input type="checkbox"/> Staff Approval	_____
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<input type="checkbox"/> Denied	_____													
<input type="checkbox"/> Withdrawn	_____													
<input type="checkbox"/> Staff Approval	_____													
	\$75.00 Application Fee: Demolition													