



OLD TOWN HISTORIC DISTRICT COMMISSION
CERTIFICATE OF APPROPRIATENESS REQUEST

APPLICANT: _____

ADDRESS: _____

PHONE: _____

LOCATION OF PROPERTY
(ADDRESS):

PROPERTY OWNER:

(Name)

(Address)

(Phone)

(Email)

LEGAL DESCRIPTION OF PROPERTY (other than address) _____

EXISTING USE: _____

PROPOSED USE: _____

6. The structure's embodiment of elements of design, detailing, materials, or craftsmanship which renders it architecturally significant;
7. The structure's embodiment of design elements that make it structurally or architecturally innovative;
8. The structure's unique location or singular physical characteristics that make it an established or familiar visual feature of the neighborhood, community or city; or the fact that it has yielded, or may be likely to yield, information important in history, and/or;
9. The structure's character as particularly fine or unique example of a utilitarian structure, including, but not limited to, farmhouses, schools, churches, public buildings, institutional offices, gas stations, with a high level of integrity or architectural significance.

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_____ 6 copies of a folded plot survey/sketch/site plan drawn to scale, as well as scale drawing/model example of the proposed action, must be submitted showing the lot or lots included in the application; showing all structures; giving appropriate dimensions, utility easements and other information listed on this application.

_____ Payment of \$25.00 application fee.

_____ The applicant is required to appear before the Old Town Commission.

Applicant's Signature

Date

Owner's Signature

Date

NOTE: By affixing signatures to this application form, the Applicant and Owner hereby verify that: they have reviewed the applicable zoning regulations; they are familiar with the specific requirements relative to this application; and they take full responsibility for this application. The above signatures further indicate that the information provided on this form and on any additional data attached hereto is true, complete, and accurate.