

City of York - Historical Commission
 CERTIFICATE OF APPROPRIATENESS - APPLICATION

Project Address: _____ **Tax Map Number:** _____
 Applicant: _____ **Zoning District:** _____
 Address: _____
Telephone: _____ **Fax:** _____ **Email:** _____
 Owner of Record: _____
 Address: _____
Telephone: _____ **Fax:** _____ **Email:** _____
 Agent (Specify relationship) _____
 Address: _____
Telephone: _____ **Fax:** _____ **Email:** _____

IMPORTANT-PLEASE READ

An application cannot be received for review by the Historical Commission unless all applicable questions have been answered and the application has been signed by the owner and/or agent; and,

Sufficient details describing the proposed project as well as the information indicated below has been submitted in accordance with specified meeting schedule deadline (copy of schedule is available upon request).

Please describe your request:

Information applicant will provide (INDICATE WITH A CHECK)

Architectural plans	<input type="checkbox"/>	Proposed sign/details	<input type="checkbox"/>	Elevations/details	<input type="checkbox"/>	Photographs	<input type="checkbox"/>
Site plans	<input type="checkbox"/>	Proposed exterior	<input type="checkbox"/>	Window & door design	<input type="checkbox"/>	Ornamentation	<input type="checkbox"/>
Landscaping plans	<input type="checkbox"/>	Lighting arrangements	<input type="checkbox"/>	Color schedule	<input type="checkbox"/>	Description attached	<input type="checkbox"/>

I hereby acknowledge by my signature below that the forgoing application is complete and accurate.

Signature: _____ Date: _____

FOR COMMISSION USE ONLY

A Certificate of Appropriateness is **GRANTED** based on the following conditions:

The application is **DENIED** based on the following reasons:

Record of Vote

Meeting Date _____

	Vote
Member: _____	<input type="checkbox"/>
Member: _____	<input type="checkbox"/>
Member: _____	<input type="checkbox"/>

	Vote
Member: _____	<input type="checkbox"/>
Member: _____	<input type="checkbox"/>
Member: _____	<input type="checkbox"/>

Chairperson Signature: _____ **Vote**