

A.4.2

CITY OF WASHINGTON
HISTORIC PRESERVATION COMMISSION
APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS

Date _____

Fee _____

A: Information on Structure Under Consideration

Address: _____

Current Owner: _____

Tax Parcel Number: _____

This document does not constitute the issuance of a Building Permit. It is the responsibility of the applicant to obtain all necessary permits before commencing work. Contact the Inspections Dept. at 975-9383. Has a Building Permit been obtained? YES _____ NO _____ N/A _____.

B: Information on Person Making Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

C: Proposed Changes to Structure

I (We) respectfully request a Certificate of Appropriateness be issued in accordance with the City of Washington Zoning Ordinance for the following reason: (details of the proposed project)

D: I (We) understand approved requests are valid for one year.

Note: Applicants, and/or their agents or parties of interest are prohibited from any contact in relation to this matter with Historic Preservation Commission members prior to the public hearing.

FOR OFFICE USE ONLY:

<u>ACTION</u>	<u>DATE</u>
<input type="checkbox"/> Approved	_____
<input type="checkbox"/> Approved with Conditions	_____
<input type="checkbox"/> Denied	_____
<input type="checkbox"/> Withdrawn	_____
<input type="checkbox"/> Staff Approval	_____

Respectfully Submitted,

Signature