**STAFF USE ONLY**

Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case Number: HP\_\_\_\_\_—\_\_\_\_\_

Received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hearing Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**CERTIFICATE OF APPROPRIATENESS**

APPLICATION FORM

*Note: The Certificate of Appropriateness is not a permit for work. Any relevant permits for building, signage, demolition, etc. must be applied and paid for separately in the Development Services Department*

**DESIGNATION TYPE PROPOSED ACTION(S)**

Contributing  Signage and/or Graphics  Façade Change

Noncontributing  Paint  New Construction

  Awning Change  Demolition

  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Proposed Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant/Authorized Representative\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*If the applicant is not the owner, s/he must be authorized by the owner to commit to changes proposed by the Commission*.

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner Name (if different than applicant):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Authorization**

I hereby certify that all statements contained within this application, attached documents and transmitted exhibits are true to the best of my knowledge and belief. In the event this proposal is approved and begun, I agree to complete the changes in accordance with the approved plans and to follow all City of Ardmore regulations for such construction. I authorize the City of Ardmore to enter the property for the purpose of observing and photographing the project for presentations and to ensure consistency between the approved proposal and the completed project. I understand that no changes to approved plans are permitted without prior approval from the Historic Preservation Commission.

**Property Owner’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*(If applicable)* I authorize my representative to speak for me in matters regarding this application. Any agreement made by my representative regarding this proposal will be binding upon me.

**Authorized Representative’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CERTIFICATE OF APPROPRIATENESS**

PROPOSED ACTION(S)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Description**

Give a detailed description and justification for **each** repair, alteration, new construction or demolition planned. Include a description and condition of affected existing materials. Attach additional pages as needed. Work not listed here will NOT be reviewed.

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**Estimated Cost** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contractor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Estimated Start Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Estimated Amount of Time Needed to Complete Work** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATE OF APPROPRIATENESS**

APPLICATION CHECKLIST

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This checklist must be submitted with the COA application form along with supporting documents. Failure to attach necessary items may delay consideration of the proposed project.

**Intent**

The purpose of documentation is to illustrate what the property looks like NOW, what work is proposed, and what the property would look like AFTER proposed work is completed. Please consult staff if you have questions about how to adequately document your proposed project.

**PROJECT CHECKLIST**

Digital color photographs on standard paper of each elevation of the site, building(s) and project area(s) provided by email or in person

Product brochures, color photographs and/or material samples when new or replacement materials are proposed

Site plan, no larger than 11x17, to scale with dimensions and a north arrow showing location of structures and project area

Elevation sketches or renderings to scale with dimensions showing location of work required for changes to exterior walls, additions and new construction

It is recommended that you visit Ardmore’s Historic Preservation website ([www.ardmorehp.org](http://www.ardmorehp.org)) to download and review the Historic District’s design guidelines and to contact staff well in advance of the COA application deadline to discuss your project and application requirements. You may also call (580) 223-3477 to make an appointment for a consultation.

**CERTIFICATE OF APPROPRIATENESS**

APPLICATION REQUIREMENTS

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Requirements**

A complete application includes all applicable information requested on checklists to provide a complete and accurate description of existing and proposed conditions. Preliminary review meeting or site visit with staff may be necessary to process the application. Owner contact information and signature is required. Late or incomplete applications will not be considered.

**Compliance**

If granted, you agree to comply with all conditions of the COA. Revisions to approved work require staff review and may require a new application and HPC approval. Failure to comply with the COA may result in project delays, fines or other penalties.

**MEETING SCHEDULE**

Applications received 30 calendar days in advance of the HPC meeting will be considered by the Board.

HPC meetings are held the second Tuesday of the month at 4:00 PM in the City Commission Chambers on the third floor of City Hall, located at 23 South Washington Street.

Applications are due by **4:00 PM** on the deadline date.

|  |  |
| --- | --- |
| **2018 Meeting Dates**(2nd Tuesday of the month) | **COA Application Deadlines** |
| **January 9** | December 13 |
| **February 13** | January 10 |
| **March 13** | February 14 |
| **April 10** | March 14 |
| **May 8** | April 11 |
| **June 12** | May 9 |
| **July 10** | June 13 |
| **August 14** | July 11 |
| **September 11** | August 15 |
| **October 9** | September 12 |
| **November 13** | October 10 |
| **December 11** | November 14 |