

**CERTIFICATE OF APPROPRIATENESS
APPLICATION
TOWN OF FRONT ROYAL**

- New Construction Rehabilitation Demolition* Sign
 Other _____

Application is hereby made for a Certificate of Appropriateness and is made subject to the local Historic District Ordinance, other local ordinances, and State laws which are presently in force or that may hereafter be enacted affecting or regulating thereto. The undersigned applicant agrees to these requirements which are a necessary condition for approval of this certificate.

This application for a Certificate of Appropriateness may be approved administratively in accordance with Section 175-89.1 of the Town Code.

Name of Applicant: _____

Address of Applicant: _____

Phone Number: _____ E-Mail: _____

Property in Question:

Street Address: _____

Business Name (if applicable) _____

Tax Map Number: _____

Historic District: Downtown Residential Area

Downtown Business Area

Are there any other applications relevant to this property or the proposed modifications being considered by any other regulatory or administrative agency?

Yes No

If Yes, please describe:

Description of Proposal, including materials and colors used with each modification (List for foundation, walls, doors, windows, trim gutters/downspouts, roofing, sign, lighting, sidewalk, fencing and gutters as applicable) (attach separate sheets if necessary):

****Please submit seven (7) complete application packages. If color photos are submitted, please submit seven (7) complete sets of colored photographs.***

****One (1) set of material samples shall be provided together with the application.***

Also include the following as applicable:

- _____ Attached map with property under consideration marked
- _____ Site Plan
- _____ Sketch, drawing, elevations
- _____ Photographs or slides showing property in question

*** NOTE: A public hearing is required for demolition work. The names and addresses of property owners immediately adjacent and opposite the property must be submitted.**

Signature of Applicant: _____ Date _____

Signature of Representative (if applicable): _____

\$100.00 Fee Receipt Number _____ Date _____

By submitting this application, the applicant grants permission to Town officials and employees to enter upon the property, which is the subject of this application, during reasonable hours and for purposes related to the application process.

OFFICE USE ONLY

Date Received _____ BAR Meeting Date: _____

Action Taken: _____

Zoning Administrator