

BAINBRIDGE HISTORIC PRESERVATION COMMISSION
APPLICATION FOR A
CERTIFICATE OF APPROPRIATENESS

This form must be filled out 15 days prior to the next scheduled meeting before the Commission can consider any requests for approval of any changes affecting the exterior appearance of any building located within a designated local historic district in the City of Bainbridge.

1. Address of property in the Historic District where proposed work is to be done.

2. Applicant / Authorized Agent Name / Mailing Address / Phone Number / Fax Number / Cell Number

3. Property Owner's Name / Mailing Address / Phone Number / Fax Number/ (if same as applicant put same)

4. Occupant's Name / Mailing Address / Phone Number / Fax Number / (if same as applicant put same)

5. Nature of Proposed Work to be Done (check all that apply)

<input type="checkbox"/> Remodeling/ Addition	<input type="checkbox"/> New Construction	<input type="checkbox"/> Demolition	<input type="checkbox"/> Moving Building
<input type="checkbox"/> Roof Alteration	<input type="checkbox"/> Siding Alteration/ Change	<input type="checkbox"/> Fence	<input type="checkbox"/> Accessory Structure
<input type="checkbox"/> Door/Window Alteration	<input type="checkbox"/> Shutters Addition/ Change	<input type="checkbox"/> Awnings	<input type="checkbox"/> Sign
<input type="checkbox"/> Other _____			

6. Describe proposed work in detail (additional pages may be attached, if necessary)

Once the COA has been approved by the Commission, an applicant has 15 days to obtain a building permit (if applicable) and 45 days to begin construction.

<p style="text-align: center;">_____ Applicant's Signature</p> <p style="text-align: center;">_____ Print Name</p>	<p><u>Mail or Deliver Application To</u> Planning Department HPC City of Bainbridge P.O. Box 158/101 S. Broad Street Bainbridge, GA 39818</p>
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FOR OFFICE USE ONLY	APPLICATION FEE	<u>ACTION</u>	DATE
Historic District _____	\$25 Application Fee	<input type="checkbox"/> Approved	_____
Application # _____	Demolition Application Fee is \$75	<input type="checkbox"/> Approved w/ Conditions	_____
Date Received _____	Make check payable to:	<input type="checkbox"/> Denied	_____
Map & Parcel # _____	City of Bainbridge	<input type="checkbox"/> Withdrawn	_____
		<input type="checkbox"/> COA Not Required	_____
		<input type="checkbox"/> Staff Approval	_____

**HISTORIC PRESERVATION COMMISSION MEETS THE
4TH TUESDAY OF EACH MONTH AT 6 P.M. AT CITY HALL COUNCIL CHAMBERS,
101 SOUTH BROAD STREET**