



**CERTIFICATE OF APPROPRIATENESS APPLICATION**

(If applicant is not the owner, as listed on the property deed, a letter from the owner authorizing the proposed work must be included along with the owner's phone number and address.)

**PROPERTY OWNER'S INFORMATION**

Owner's Name: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
Suite: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT'S CONTACT INFORMATION**

Owner's Name: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
Suite: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY LOCATION**

Tax Parcel Number(s): \_\_\_\_\_ Size in Acres: \_\_\_\_\_  
Address(es): \_\_\_\_\_  
Number of existing structures: \_\_\_\_\_

**DESCRIPTION OF PROJECT**

Project Type  Residential  Commercial  Industrial  Other project.  
Briefly, yet accurately, describe all new construction, alterations, repairs or other changes to the exterior appearance or site for the property under consideration. Use additional pages as needed. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**STATEMENT**

Has this property been before the Mayor and Council, Downtown Development Authority, Architectural Review Board, Board of Appeals or Board of Planning and Zoning within the last 24 months? Yes No  
If yes, please list the board and reference number: \_\_\_\_\_  
\_\_\_\_\_

**REQUIRED ATTACHMENTS**

- Landscape Plan (copies: 1 full size)  An electronic version (pdf)  Vicinity Map  Legal description
- Material and Color Samples (x2)  Architectural elevations (1 full size)  Floor plans for each level (1 full size)
- Scaled site plan showing existing and proposed improvements. (1 full size)  Completed Application

**OWNER'S SIGNATURE**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**CITY USE ONLY. DO NOT WRITE IN THIS BOX.**

Date received: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Application Number: \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_

**DEADLINE AND HEARING SCHEDULE**

The process for obtaining a COA from the ARB are as follows: 1) applications submitted on the 3rd Tuesday of each month 2) will be heard before the Architectural Review Board on the 3<sup>rd</sup> Tuesday of the following month.

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<b>Foundation Type: (Circle One)</b>		
Slab	Crawl Space	Basement
<b>Building Dimensions:</b>		
Width:	Length:	Height:*
<b>Area Dimensions:</b>		
First Floor:	Second Floor:	Third Floor:
Basement**:	Front Porch:	Rear Porch:
Patio:	Garage:	
<b>Primary Roof System: (Circle One)</b>		
Gable	Hip	Grambel
Mansard	Jerkinhead	Flat
Saltbox	Shed	Other:
<b>Roof Pitches:</b>		
Primary Roof Pitch:		
Secondary Roof Pitch:		
Additional Roof Pitch:		
<b>Floor and Elevation Plan information to be included on each page:</b>		
Street Address and Lot Number	Scale with scale bar	Scaled measurement for each floor level and building elevation
<b>Site and Landscape Plan information to be included on each page:</b>		
Scale with scale bar and North Arrow	Building and driveway foot print	HVAC and utility equipment
Location and type of plantings	List of planting materials	
*Height of building means the vertical distance measured from grade to the highest finished roof surface in the case of flat roofs or to a point at the average height of the highest roof having a pitch.		
**Dwellings with a basement and a third story must submit a grade plan elevation to determine if the residential building has a fourth floor.		

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**ELEVATION COLOR AND MATERIAL PLACEMENT ADDENDUM**  
*Façade and sides*

Component	Color (Include manufacturer's ID)	Material
Primary Façade: First Floor		
Primary Façade: Second Floor		
Primary Façade: Third Floor		
Left Side: First Floor		
Left Side: Second Floor		
Left Side: Third Floor		
Left Side: Basement		
Right Side: First Floor		
Right Side: Second Floor		
Right Side: Third Floor		
Right Side: Basement		
Rear: First Floor		
Rear: Second Floor		
Rear: Third Floor		
Rear: Basement		

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**COLOR AND MATERIAL PLACEMENT ADDENDUM**  
*Exterior Components*

Component	Color (Include manufacturer’s ID)	Material
Masonry		
Garage Doors		
Trim		
Mortar		
Gutters		
Corner Board		
Railings		
Windows		
Window Sills		
Window Muntin/Mullion		
Columns		
Other Architectural Features		
Other Architectural Features		

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# Ownership Affidavit & Designation of Agent

## I. Ownership.

I, \_\_\_\_\_, hereby attest to ownership of the property described below:

Parcel I.D. Number(s) \_\_\_\_\_

Location address: \_\_\_\_\_

\_\_\_\_\_ for which this Application is submitted.

The ownership, as recorded on the deed, is in the name of: \_\_\_\_\_

Please complete the appropriate section below:

**NOTE: The person signing under section IV Acknowledgement, must be listed below as an officer or partner.**

**Individual**

**Corporation/Limited Liability Company (LLC)**

**Partnership**

**Government Entity**

Provide Names of Officers/Members:

Provide Names of General Partners:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Secretary of State Registration Number: \_\_\_\_\_

Name/Address of Registered Agent: \_\_\_\_\_

## II. Designation of Owner's Agent. (Leave blank if not applicable)

As the owner of the above designated property and the applicant for which this affidavit is submitted, I wish to designate the below named party as my agent in all matters pertaining to the location address. In authorizing the agent named below to represent me, or my company, I attest that the application is made in good faith and that any information contained in the application is accurate and complete to the best of my knowledge and belief. **(Note: Prior to the issuance of a building permit, the owner's agent must be the contractor listed on the permit application.)**

Owner's Agent: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

## III. Notice to Owner.

A. All changes in Ownership & Applicant's Agent prior to issuance shall require new affidavit. If ownership changes the new owner assumes the obligations and the original applicant is released from responsibility for actions taken by others after the change in ownership.

B. If the Owner intends the Designation of Applicant's Agent to be limited in any manner, please indicate the limitation below. (i.e., Limited to obtaining a certificate of concurrency for the parcel; limited to obtaining a land use compliance certificate; etc.)

\_\_\_\_\_  
 \_\_\_\_\_

## IV. Acknowledgement.

• **Individual**

\_\_\_\_\_  
*Signature*

Print Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone #: \_\_\_\_\_

• **Government Entity**

\_\_\_\_\_  
 Print Government Name

By: \_\_\_\_\_  
*Signature*

Print Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Department: \_\_\_\_\_

• **Corporation/LLC**

\_\_\_\_\_  
 Print Corporation/LLC Name

By: \_\_\_\_\_  
*Signature*

Print Name: \_\_\_\_\_  
 Its: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone #: \_\_\_\_\_

• **Partnership**

\_\_\_\_\_  
 Print Partnership Name

By: \_\_\_\_\_  
*Signature*

Print Name: \_\_\_\_\_  
 Its: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone #: \_\_\_\_\_

**NOTARY INFORMATION (Please use appropriate block.)**

STATE OF GEORGIA  
 COUNTY OF \_\_\_\_\_

• **Individual**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.

• **Government Entity**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ as \_\_\_\_\_ and on behalf of \_\_\_\_\_, who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.

• **Corporation/LLC**

Before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ of \_\_\_\_\_, a \_\_\_\_\_ **corporation/LLC**, on behalf of the corporation/LLC, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.

• **Partnership**

Before me, this \_\_\_\_\_ day Of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_, partner/agent on behalf of \_\_\_\_\_, a **partnership**, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.

NOTARY STAMP:

Signature of Notary

My commission expires: \_\_\_\_\_

Print Notary Name

Identification Method: \_\_\_\_\_ Personally known.  
 \_\_\_\_\_ Produced I.D. – Type: \_\_\_\_\_