

City of Hillsboro

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS



OWNER MAKING APPLICATION: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

LOCATION OF PROPERTY TO BE IMPROVED: _____

Check items which are applicable to your proposed EXTERIOR project:

- | | |
|---|--|
| <input type="checkbox"/> <i>Restoration/Replacement of Architectural Features</i> | <input type="checkbox"/> <i>Paving</i> |
| <input type="checkbox"/> <i>Painting</i> | <input type="checkbox"/> <i>New Construction</i> |
| <input type="checkbox"/> <i>Window Repair/Replacement</i> | <input type="checkbox"/> <i>Awning</i> |
| <input type="checkbox"/> <i>Door Repair/Replacement</i> | <input type="checkbox"/> <i>Stairs/Fire Escapes</i> |
| <input type="checkbox"/> <i>Trim Repair/Replacement</i> | <input type="checkbox"/> <i>Sign Repair/Replacement OR NEW</i> |
| <input type="checkbox"/> <i>Roof Repair/Replacement</i> | <input type="checkbox"/> <i>Demolition</i> |
| <input type="checkbox"/> <i>Wall Repair/Replacement</i> | <input type="checkbox"/> <i>Other (Describe)</i> |
| | _____ |
| | _____ |

EXPLAIN, thoroughly, the proposed work. Describe materials and colors to be used and provide other pertinent details.

ATTACH specifications, paint chips, photos, blue prints or sketches, awning styles and colors, any other information that will assist the Design Review Board in making their decision on the proposed project.

(Check) I, Owner, want to be notified of Design Review Board Meeting date.

Applicant's Signature

Date

