

# APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

## HISTORIC HARBOUR TOWN 1837 DISTRICT

Board meets the 1<sup>st</sup> Wednesday of each month @ **6:00 pm** in the Municipal Complex, 687 Decatur Street, Vermilion, OH.

Property Address: \_\_\_\_\_ Δ -  
Residential      Δ- Commercial

Property Owner(s):Name: \_\_\_\_\_  
Phone#: \_\_\_\_\_

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

**Applicant(s)**, if other than owner [If Owner, mark "Same as above"]

Name: \_\_\_\_\_  
Phone#: \_\_\_\_\_

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

Have the Design Guidelines for the Historic District been reviewed? Δ - Yes

Δ - No

(Copies available at Building Dept. in the forms rack w/application)

Is the structure on this property listed on the National Register of Historic Places?

Δ - Yes      Δ - No

The improvement project involves: Δ - an Existing Structure  
Δ - a New Structure

**Define/Explain Scope of Project** (Check appropriate items below and/or attach separate descriptive information)

**SUBMIT ... for distribution to the Board (minimum 6 copies), applicants should supply material/color samples; provide old/current photographs and site layouts [including building elevations/architectural renderings when practical], so the aesthetic impact of all proposed plans can be fairly assessed.**

_____ Awnings	_____ Shutters	_____ Exterior
Painting _____ Roofing	_____ Doors, Entrances	_____ Complete
Façade Restoration _____ Siding, Gutters	_____ Windows, Trim	_____ Partial
Façade Restoration _____ Rear Access	_____ Fence	_____ Energy Conservation
_____ Landscaping	_____ Signage	_____ Demolition

**Owner/Applicant Comments about proposed work (use separate sheet if necessary):**

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(To-Scale Site Layouts may be drawn on back)

Contact 204-2465 or 204-2410 before noon on scheduled meeting days for updates.

Questions/Comments may be directed to current Board Members. A Roster is available online at [www.vermilion.net](http://www.vermilion.net).

*I understand the criteria for this application, aesthetic review and approval by the Design Review Board for the Historic District, and I agree to be subject to the Secretary of the Interior's Standards for the above-described work in accordance with City ordinances. I also understand that all projects are subject to further reviews related to zoning compliance, as determined by the Building Department; and that I must use a separate form to apply for any applicable Building Permits in order to obtain construction approval.*

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_ Co-Applicant's Signature, *if applicable* : \_\_\_\_\_ Date: \_\_\_\_\_

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Building Department Comments (440-204-2410): \_\_\_\_\_

Building Inspector/Clerk (*signoff of receiving notification of approval from Board*): \_\_\_\_\_ Date: \_\_\_\_\_

Board Action (see Minutes \_\_\_ - \_\_\_ - \_\_\_) **Δ - APPROVED Δ - APPROVED W/ CONDITIONS Δ - TABLED/NO SHOW/NOT APPROVED**