

TOWN OF SPENCER, NC
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

TO: SPENCER HISTORIC PRESERVATION COMMISSION
TOWN OF SPENCER
POST OFFICE BOX 245
SPENCER, NC 28159-0245

DATE: _____

OWNER AND PROPERTY INFORMATION		Please complete in ink or type	
NAME OF OWNER: _____			
STREET ADDRESS OF PROPERTY: _____			
NAME OF CONTACT PERSON: _____			
TELEPHONE NUMBER:		(HOME) _____	(WORK) _____
List the names and addresses of the owners of all properties located within 100 feet of your lot (both sides, across the street, and behind):			
NAME:	_____	ADDRESS:	_____
_____	_____	_____	_____
_____	_____	_____	_____
<i>Attach additional sheets if necessary.</i>			
PROJECT INFORMATION		Place an "X" in the box beside the term(s) which most accurately denote the activity for which you are seeking a Certificate of Appropriateness.	
<input type="checkbox"/> ROUTINE MAINTENANCE	<input type="checkbox"/> RESTORATION	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> ADDITION
<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> REMOVAL	<input type="checkbox"/> MATERIAL ALTERATION	<input type="checkbox"/> OTHER _____
**If you checked only "ROUTINE MAINTENANCE," please complete item 2 below. For any other activity please complete items 1 through 3 below. All information must be furnished in order for application to be considered.			
Please attach additional sheets and materials in order to show the following information. Please indicate with a check (✓) all that have been enclosed with this application.			
1. _____	Plot plan with accurate measured distances.*		
2. _____	Written description of project. Include description of materials to be used and an estimate of time to complete.**		
3. _____	Drawings of proposed work, including plan drawings with dimensions and elevation drawings showing new facades. (Note: Large drawings may be reduced)		
*Plot plans must show relationship of proposed work to buildings, additions, sidewalks, drives, trees, and property lines. This plan does not have to be drawn to scale, but all measurements should be shown and accurate. A copy of the survey completed when property was bought is acceptable if it meets all other requirements.			
**Describe in detail the activity for which you are seeking a Certificate of Appropriateness. The Commission reserves the right to require all additional information as they may determine to be necessary to fully understand the nature of the intended activity.			
In determining the appropriateness of material alteration, restoration, new construction, removal, or demolition, the Commission shall utilize its design guidelines.			
I, the undersigned, certify that the work designated in this application will be done according to the laws of the State of North Carolina and all ordinances of the Town of Spencer, NC.			
_____		_____	
Signature of Applicant		Date	
FOR STAFF USE ONLY:			
Level of Activity:	<input type="checkbox"/> Routine Maintenance	<input type="checkbox"/> Minor	<input type="checkbox"/> Major
Approved?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Signature of Planner	_____	Date	_____
Signature of HPC Chairman	_____	Date	_____
Date Permit Issued	_____	Permit #	_____