

Office Use Only

COA Number:

Application Accepted as Complete:

HISTORIC DISTRICT BOARD OF REVIEW DOWNTOWN SAVANNAH HISTORIC DISTRICT

Application for Certificate of Appropriateness

Per House Bill 493, detailed checklists of items required to be submitted for each type of project are supplemental to this application. Each item **must be checked off and a page number where the**

item is located must be noted and included with the application. The applicant must sign the affidavit, at the end of the application and each required checklist, certifying that all required items are provided. If there are questions regarding items required for your specific project, contact staff for clarification prior to submitting the application.

<u>Note</u>: Applications that do not provide documentation or required materials will be noted as incomplete and may result in delays in the Board or Staff's review of the application and/or denial of the request. Revisions made to the applications after the submittal deadline and prior to the Board hearing may be continued to the following month's hearing. The Board reserves the right to require additional information if it believes that the submission of such information is necessary to understand the nature of the intended activity. **Email submissions to <u>historic@thempc.org</u>. Ensure the file size does not exceed 15 MB.** If Email is not available, contact the office for alternate arrangements.

Applicant Contact Information:

| Name (Business & Cont | tact Person): | | |
|--|-------------------------------|---|------------------------|
| Address: | | City: | |
| State: Zip: | Phone: | E-Mail: | |
| Property Owner Contact I | nformation: | | |
| Name: | | | |
| | | City: | |
| | | E-Mail: | |
| Official Correspondence: | □ Applicant □ Owner □ Other | | (Check all that apply) |
| Property Information of P | roposed Work: (PIN and Zoning | g information can be found at www | w.sagis.org.) |
| Address: | | | |
| | | Zoning: | |
| Scope of Work: (Check all | that apply.) | | |
| STAFF REVIEW: | | BOARD REVIEW: | |
| Color Change | Brick Repointing | □ Rehabilitation | Illuminated Signs |
| □ Roof Repair/Replace | □ Shutters | □ Alterations | Gences |
| □ Awnings | □ Windows and/or Doors | □ Additions | Demolition |
| Stucco Repair | Mechanical Screening | □ New Construction (Part I) | □ Relocation |
| Non-Illuminated Sign | s | □ New Construction (Part II) | |
| OTHER: | | □ New Construction (Accessory Building, Parts I and II) | |
| Amendment to Previous COA Previous Case File Number: | | Special Exception(s) Requests | |
| Other (Description): Contact staff for checklist requirements prior to submittal. | | Variance Recommendation Requests | |

Submit Application and Checklist(s) by Email to the Preservation Department at historic@thempc.org. Questions? Email the Preservation Department at historic@thempc.org or call 912-651-1440.

2022 Historic District Board of Review Schedule: (Application deadline is 4 weeks before the scheduled meeting date.)

| Application Deadline (Due by Close of Business: 5pm)* | Meeting Date at 1:00 p.m.: | | |
|---|-----------------------------|--|--|
| ☐ Thursday, December 16, 2021 | Wednesday, January 12, 2022 | | |
| □ January 13, 2022 | February 9 | | |
| □ February 10 | March 9 | | |
| Giran March 16 | April 13 | | |
| April 14 | May 11 | | |
| □ May 12 | June 8 | | |
| □ June 16 | July 13 | | |
| □ July 14 | August 10 | | |
| □ August 18 | September 14 | | |
| □ September 16 | October 12 | | |
| □ October 13 | November 19 | | |
| □ Friday, November 17 | December 14 | | |
| * For notitions that more perioded at the immediately prior mosting the deadline is extended and (1) mode | | | |

* For petitions that were reviewed at the immediately prior meeting, the deadline is extended one (1) week.

Estimated Cost of the Proposed Work: \$_____

Filing Fee Schedule: (Fees shall be payed digitally at https://www.thempc.org/Application#gsc.tab=0)

| Estimated Cost of Scope of Work | Filing Fee | |
|---|---|--|
| □ \$0 - \$2,500 | \$25.00 | |
| □ \$2,501-\$5,000 | \$50.00 | |
| □ \$5,001-\$25,000 | \$75.00 | |
| □ \$25,001-\$50,000 | \$100.00 | |
| □ \$50,001-\$100,000 | \$150.00 | |
| □ \$100,001- \$500,000 | \$200.00 | |
| □ \$500,001 - \$1,000,000 | \$300.00 | |
| □ \$1,000,001 - \$5,000,000 | \$500.00 | |
| □ \$5,000,001 - \$10,000,000 | \$1,000.00 | |
| □ Over \$10,000,000 | \$1,500.00 | |
| Other | Filing Fee | |
| □ Variance Recommendation Request | \$0.00 | |
| Special Exception Request | Single/Two Family Residential: \$120, All Others: \$350 | |
| Demolition of a contributing building | \$500.00 | |
| □ Appeal of Staff Decision | \$250.00 | |
| □ Amendment to previous COA | Estimated cost of scope of work for amendment | |
| □ After-the-Fact (Work completed without a COA) | Double the estimated cost of the scope of work | |

<u>Affidavit Certifying Completeness of Application</u>: I hereby acknowledge that I understand the requirements listed above for what constitutes a complete application. I have checked off each box and included a page number where the item is located. I confirm that the requirements for a complete application have been met.

Signature:

Date:

Date:

Signature of Legal Owner or Authorized Agent: I have read and understand all the information enclosed in this application form. I hereby certify that I am the legal owner or authorized agent for the legal owner of the subject property.

Signature:_____

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