



Office Use Only COA Number: _____ Application Accepted as Complete: _____
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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.**

Note: 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 historic@thempc.org. 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 & Contact Person): _____
 Address: _____ City: _____
 State: _____ Zip: _____ Phone: _____ E-Mail: _____

Property Owner Contact Information:

Name: _____
 Address: _____ City: _____
 State: _____ Zip: _____ Phone: _____ E-Mail: _____

Official Correspondence: Applicant Owner Other _____ (Check all that apply)

Property Information of Proposed Work: (PIN and Zoning information can be found at www.sagis.org.)

Address: _____
 PIN (Property Identification Number): _____ Zoning: _____

Scope of Work: (Check all that apply.)

STAFF REVIEW:		BOARD REVIEW:	
<input type="checkbox"/> Color Change	<input type="checkbox"/> Brick Repointing	<input type="checkbox"/> Rehabilitation	<input type="checkbox"/> Illuminated Signs
<input type="checkbox"/> Roof Repair/Replace	<input type="checkbox"/> Shutters	<input type="checkbox"/> Alterations	<input type="checkbox"/> Fences
<input type="checkbox"/> Awnings	<input type="checkbox"/> Windows and/or Doors	<input type="checkbox"/> Additions	<input type="checkbox"/> Demolition
<input type="checkbox"/> Stucco Repair	<input type="checkbox"/> Mechanical Screening	<input type="checkbox"/> New Construction (Part I)	<input type="checkbox"/> Relocation
<input type="checkbox"/> Non-Illuminated Signs		<input type="checkbox"/> New Construction (Part II)	
OTHER:		<input type="checkbox"/> New Construction (Accessory Building, Parts I and II)	
<input type="checkbox"/> Amendment to Previous COA Previous Case File Number: _____		<input type="checkbox"/> Special Exception(s) Requests	
<input type="checkbox"/> Other (Description): Contact staff for checklist requirements prior to submittal.		<input type="checkbox"/> Variance Recommendation Requests	

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

Application Deadline Dates, by 3:00 p.m.*	Meeting Date at 1:00 p.m.:
<input type="checkbox"/> Thursday, December 16, 2021	Wednesday, January 12, 2022
<input type="checkbox"/> January 13, 2022	February 9
<input type="checkbox"/> February 10	March 9
<input type="checkbox"/> March 16	April 13
<input type="checkbox"/> April 14	May 11
<input type="checkbox"/> May 12	June 8
<input type="checkbox"/> June 16	July 13
<input type="checkbox"/> July 14	August 10
<input type="checkbox"/> August 18	September 14
<input type="checkbox"/> September 16	October 12
<input type="checkbox"/> October 13	November 19
<input type="checkbox"/> Friday, November 17	December 14
* 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 paid digitally at <https://www.thempc.org/Application#gsc.tab=0>)

Estimated Cost of Scope of Work	Filing Fee
<input type="checkbox"/> \$0 - \$2,500	\$25.00
<input type="checkbox"/> \$2,501- \$5,000	\$50.00
<input type="checkbox"/> \$5,001- \$25,000	\$75.00
<input type="checkbox"/> \$25,001- \$50,000	\$100.00
<input type="checkbox"/> \$50,001- \$100,000	\$150.00
<input type="checkbox"/> \$100,001- \$500,000	\$200.00
<input type="checkbox"/> \$500,001 - \$1,000,000	\$300.00
<input type="checkbox"/> \$1,000,001 - \$5,000,000	\$500.00
<input type="checkbox"/> \$5,000,001 - \$10,000,000	\$1,000.00
<input type="checkbox"/> Over \$10,000,000	\$1,500.00
Other	Filing Fee
<input type="checkbox"/> Variance Recommendation Request	\$0.00
<input type="checkbox"/> Determination of Contributing Status	\$0.00
<input type="checkbox"/> Special Exception Request	\$1,000.00
<input type="checkbox"/> Special Exception – Church, Family Care Home, Family	\$500.00
<input type="checkbox"/> Demolition of a Contributing Building	\$500.00
<input type="checkbox"/> Appeal of Staff Decision	\$250.00
<input type="checkbox"/> Amendment to previous COA	Estimated cost of scope of work of amendment
<input type="checkbox"/> After-the-Fact (Work completed without a COA)	Double the estimated cost of the scope of work

Affidavit Certifying Completeness of Application: 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:** _____

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: _____ **Date:** _____