

WEST PIKELAND TOWNSHIP
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
REVIEW BY HISTORIC ARCHITECTURAL REVIEW BOARD

IMPORTANT – APPLICANT TO COMPLETE ALL ITEMS IN SECTIONS I, II, III, IV

Section I

Location of Buildings: _____ Zoning _____
District _____ (No.) _____ (Street) _____
Between _____ and _____
_____ (Cross Street) _____ (Cross Street)
Subdivision Name _____ Lot _____
Number _____
Tax Parcel # _____ Ownership: Private (individual, corporation, nonprofit institution, ect.)
 Public (Federal, State, or Local)

Section II

Owner or Lessee
Name: _____
Mailing Address: _____ (No. Street)
_____ (City, State, Zip)
Phone: _____ (cell) _____ (fax) _____
Email: _____

Contractor
Name: _____
Contact Person: _____
Mailing Address _____ (No., Street)
_____ (City, State, Zip)
Phone: _____ (cell) _____ (fax) _____
Email: _____

Architect or Engineer
Name: _____
Contact Person: _____
Mailing Address _____ (No., Street)
_____ (City, State, Zip)
Phone: _____ (cell) _____ (fax) _____
Email: _____

The Historic Architectural Review Board meets on the fourth Thursday of each month at 5:30 p.m. at the Township Building. The application for a Certificate of Appropriateness shall be received by the West Pikeland Township office at 1645 Art School Road, Chester Springs, Pa. 19425 eight (8) calendar days prior to the next scheduled meeting of HARB to be placed on the Agenda. Please contact the Township Secretary for a schedule of meeting dates and times.

For Office Use Only:

Date Comments Received from Building/Zoning Officer: _____
 Date HARB Application Received by Township Office _____
 Date of Application Review Meeting by HARB: _____

Within thirty (30) days following the discussion of this application between the applicant and HARB at the scheduled HARB meeting, HARB shall render, in writing, a letter of recommendation and discussion of adequacy or inadequacy to the Board of Supervisors. The Board of Supervisors shall review HARB's letter and, if applicable, render a decision at their next regularly scheduled Board of Supervisors meeting following the receipt of the HARB letter regarding the matter.

Date of HARB Letter of Review received by Township Office: _____
 Date of Board of Supervisors Meeting to review Decision: _____
 Letter of Decision of Board of Supervisors sent to Applicant: _____

Section III

DESCRIBE THE PROJECT

- | | |
|---|--|
| <p>1. Additions/New Construction/Subdivision</p> <ul style="list-style-type: none"> <input type="checkbox"/> Additions <input type="checkbox"/> New Construction <input type="checkbox"/> Subdivision/Land Development (<i>for information only</i>) <input type="checkbox"/> Variance <p>2. Alterations/Renovation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Storefront <input type="checkbox"/> Roof/chimney/cornice <input type="checkbox"/> Walls <input type="checkbox"/> Doors <input type="checkbox"/> Windows/shutters <input type="checkbox"/> Porch/stoop/stairs <input type="checkbox"/> Paint <input type="checkbox"/> Repointing <input type="checkbox"/> Exterior cleaning <input type="checkbox"/> Trim <input type="checkbox"/> Fences | <p>3. Signs/Awnings</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sign <input type="checkbox"/> Awning <input type="checkbox"/> Other Sign <p>4. Demolition</p> <ul style="list-style-type: none"> <input type="checkbox"/> Demolition |
|---|--|

SECTION IV

DETAIL DESCRIPTION OF THE PROJECT

APPLICANT SHALL SUBMIT (10) COPIES OF THE FOLLOWING PLANS WITH THIS APPLICATION

- a. Color photographs showing the present appearance of the structure, fence, sign or area.
- b. A dimensioned site plan showing the location of the structure, fence or sign within the lot or property.
- c. Good quality drawings or sketches of the proposed addition(s) or renovation(s).
 (Include a description of materials, finishes and colors).
- d. Catalogue cuts of any replacement windows, doors, railings, downspouts, trim and hardware.

SECTION V

PRESERVATION OF HISTORIC CHARACTER:

What steps will be taken to preserve your building's historic character and that of the surrounding district?

SECTION VI

OTHER INFORMATION THE HARB SHOULD TAKE INTO CONSIDERATION REGARDING THE APPLICATION:

SECTION VII

CERTIFICATION

Signature of Applicant _____ Date _____

Printed Name of Applicant _____

Signature of Owner: _____ Date _____

Note: This application along with a Building Permit Application must be submitted to the Township Office a minimum of eight (8) calendar days before the next HARB meeting.

TO BE FILLED IN BY HARB COMMITTEE

Date Received from Township Office: _____
Date Application deemed complete: _____
Date of Meeting this Application Reviewed: _____
Letter of Recommendation sent to BOS: _____

Application No. _____
Date of Application (complete) _____
Date Twp. Office Notified _____