

CITY OF PLANT CITY

PLANNING & ZONING DIVISION 302 W REYNOLDS ST PLANT CITY, FL 33563 Telephone (813) 659-4258 e-mail: planning@plantcitygov.com

INSTRUCTIONS

FOR SUBMITTING AN APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS

A Certificate of Appropriateness (design review) is required prior to **ANY** construction activity or any activity which results in visible changes to the exterior of the property in the Historic Districts. A building permit will not be issued without review by the Design Review Official or the Historic Resources Board, depending on the nature of the activity. A Certificate of Appropriateness application must be returned to the Planning and Zoning Division at City Hall, 302 W. Reynolds St., 2nd floor.

Please check with the building division to verify whether or not a building permit will be required for your project's scope of work.

For construction activity consisting of:

New Construction and Additions: Submit complete construction documents.

Minor Renovations and Repairs (including painting): Written description or drawing describing all the work to be done and descriptions/product names or samples of materials/colors.

Restoration: When returning a property to its original style and character, submit photo documentation of the building from the period to which it is being restored.

Demolition: Provide photograph of building to be demolished; a statement of the purpose for the demolition and future use of the site; and an analysis of the economic feasibility of rehabilitation vs. cost of demolition.

Signage: Submit rendering of sign showing size, lettering, colors, type of support, location on structure and lighting, if any.

Walls and Fences: Submit photos of type of fence (material/manufacturer) and indicate location on site plan.

For complete requirements and details, please refer to the Historic District Design Standards.

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APPLICATION FOR A HISTORIC DISTRICT CERTIFICATE OF APPROPRIATENESS

By Statt: Application #		Contributing Yes /	No Date Submitted:	
	(applicant please	e provide information betwee	en the bold lines)	
Property Address or Locat	ion:			
Owner's Name:		Phone:		
Applicant's Name & Comp	any (if different):_			
			e-mail	
Type of Property:				
PROPOSED RESTORATI	— ON / RENOVATIO	ONS / REPAIRS / REL	OCATION / ETC:	
Exterior Walls Exterior Doors Windows Porches Awnings or Canopic Fencing Exterior Painting & Roofing Detailed description of pro	es Color Changes	New Accessory New deck, ram Building Demol General Repair Other (describe	ition or Relocation s (describe below) below)	
the application being accepsamples; manufacturer's saproposed work is consistent work will conform to the Rehabilitating Historic Bu SIGNATURE OF THE OW initial - I will check wi	oted by staff: detailed literature; phosein with the adopted "Secretary of the ildings." INER and/or the building Division of the staff of the staf	iled plans, including a tographs; and any other including a strict designation in the interior's Standard APPLIC sion to see if a building performance in the including and including a strict period and including	m MUST be included with an applicate site plan and elevation(s); color at supporting documentation to show the standards for Plant City" and the standards for Rehabilitation and Guide CANT ermit is required for this project. It be reviewed by staff PRIOR to compare the site of the standards of	nd material ow that the re proposed delines for
ACTION TAKEN:	Date			
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			d below* and/or on attached shee	
*HRB Condition(s) of Appr	oval:			_
Signed: For information, call the City of Plan	t City Planning & Zoning		Date: / Hall 2 nd Floor 302 W Reynolds Street, Plant	 City FL 33563