City of Gainesville DEPARTMENT OF SUSTAINABLE DEVELOPMENT

Telephone Number

E-Mail Address

Certificate of Appropriateness (COA) Application

HISTORIC PRESERVATION BOARD (HPB)

momas Center - Building B
306 NE 6th Ave Gainesville, FL 32601
352.334.5023
www.gainesvillefl.gov

USE THIS FORM TO				PROJECT TYP	E:				
Apply for approval for projects located within historic districts. Projects may require either a Board-		New Construction Addition Alteration Demolition Fence							
	level review or a Staff-level review.		Relocation	🗌 Repair 🔄 Re-r	oof 🗌 Sign	Request to	lift demolition delay		
FEES Once application is submitted it will be reviewed for completeness. Once verified complete, an invoice will be		Other:			Amendment to (COA ()			
emailed to the applicant.									
	Type of Review	Fee	EZ Fee	APPROVAL I YPE:			Staff Approval		
	Certificate of Appropriateness (COA): Staff Review	FREE	FREE			Board Approv	oard Approval: 🗌 Conceptual or 🗌 Final		
	Certificate of Appropriateness (COA): Board		\$77.05	PROPERTY IN Property Appraiser si	IFORMATION: Pro ite www.acpafl.org	pperty information	can be found at th	ne Alachua County	
	Review – Single Family Structure or its Accessory Structure	\$154.10		Historic District:	Northeast (Duck	pond) 🗌 Sou	itheast Pl	easant Street	
	Certificate of Appropriateness (COA): Board Review – All Other	\$770.79	\$385.40	40			niversity Heights (South)		
	Structures			Site Address					
	After-the-Fact Certificate of Appropriateness (COA): if work begun prior to issuance of a	\$540.50 + application fee	\$270.25 + application fee	Parcel ID #(s)					
BASIS FOR REVIEW All applications, whether Staff or Board review, are reviewed for consistency with the City of Gainesville Comprehensive Plan,			OWNER OF RECORD	As recorded with the <u>Alachua County Prope</u> <u>Appraiser</u>	APPLIC OR AG	CANT and subr behalf a for Agent	ent will be representing nitting on the owner's n <u>Owner's Authorization</u> nt <u>Representation</u> form included with application.		
		Owner(s) Name		Applicant	Applicant Name				
	Land Development Code, and applicable guidelines such as the Guidelines for the Historic Districts		Company (if applicable)		Company	Company (if applicable)			
are based on the U.S. Secretary of the Interior's Standards for Rehabilitation.			cretary of	Street Address		Street Add	Street Address		
Renabilitation.		City State Zip		City State	City State Zip				

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IMPORTANT NOTES

ţ.

PRE-APPLICATION MEETING

To guide you through the process and to ensure that your application is properly processed, you can meet with the Preservation Planner prior to submitting your application. This is recommended prior to your anticipated submittal date to allow time for review.

Staff approval applications are accepted on a rolling basis and are generally completed within 5 business days. Please note that projects can only begin after receiving a Certificate of Appropriateness (COA) and a building permit (if required).

CONCEPTUAL APPROVALS

Conceptual approvals are provided by the HPB as a courtesy to the applicant in an effort to allow comment from the Historic Preservation Board during the conceptual design process. The HPB will provide the applicant with feedback and guidance relating to the proposal. In all cases, the applicant must return to the HPB to seek final approval of their projects. There is no additional fee for this review above the Certificate of Appropriateness fee.

PROJECT DESCRIPTION DESCRIBE THE PROPOSED PROJECT AND MATERIALS.

Describe the proposed project in terms of size, affected architectural elements, materials, and relationship to the existing structure(s).

List proposed materials:

Project Scope	Manufacturer	Product Description	Color (Name/Number)
Exterior Fabric			
Doors			
Windows			
Roofing			
Fascia/Trim			
Foundation			
Shutters			
Porch/Deck			
Fencing			
Driveways/Sidewalks			
Signage			
Other			

PLEASE SUBMIT ALL PRODUCT BROCHURES, PAINT COLOR SAMPLES, AND MATERIAL SAMPLES WITH YOUR APPLICATION.

CERTIFICATION

By signing below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures and have read and understand the following:

- 1. I/We hereby attest to the fact that the above supplied property address(es), parcel number(s) and legal description(s) is (are) the true and proper identification of the area of this petition.
- 2. I/We authorize staff from the Department of Sustainable Development to enter onto the property in question during regular city business hours in order to take photos which will be placed in the permanent file.
- 3. I/We understand that the COA review time period will not commence until the application is deemed complete by staff and may take up to 10 days to process. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date.
- 4. I/We understand that, for Board review cases, an agenda and staff report will be available on the City's website approximately one week before the Historic Preservation Board meeting.
- 5. I/We understand that the Historic Preservation Board meetings are conducted in a quasi-judicial hearing and as such, exparte communications are prohibited (Communication about your project with a Historic Preservation Board member).
- 6. I/We understand that the approval of this application by the Historic Preservation Board or staff in no way constitutes approval of a Building Permit for construction from the City of Gainesville Building Department.
- 7. I/We understand that all changes to the approved scope of work stated in a COA have to be approved by the HPB before work commences on those changes. There will be no charge for a revision to a COA. Making changes that have not been approved can result in a Stop Work Order being placed on the entire project and/or additional fees/penalties.
- 8. I/We understand that any decision of the HPB may be appealed to the City Commission. Petitions to appeal shall be presented within thirty (30) days after the decision of the HPB; otherwise the decision of the HPB will be final.
- 9. I/We understand that Certificates of Appropriateness are only valid for **one (1) year** from issuance.

Applicant (Signature)

Applicant (Print)

i	TO BE COMPLETED BY CITY STAFF		Date Received		Received By:	
Please submit this application	Petition #:					
and all required supporting materials via email to	Zoning:			 Staff Approval — No Fee Single Family Structure or its Accessory Structure 		
planning@gainesvillefl.gov	Contributing?	□Yes	□No			
Once the application is received and	Pre-Conference?	□Yes	□No	□ Ad Valorem Tax Exemption		
deemed complete we will contact you regarding payment. For	Application Complete	□Yes	□No	□ After-The-Fact Certificate of Appropriateness		
questions regarding application submission, please call	Enterprise Zone?	□Yes	□No			
352 334-5023	Request for Modification of Setbacks?	□Yes	□No			

Date

City of Gainesville

HISTORIC PRESERVATION BOARD (HPB)

DEPARTMENT OF SUSTAINABLE DEVELOPMENT

Owner's Authorization for Agent Representation Thomas Center - Building B 306 NE 6th Ave Gainesville, FL32601 352.334.5023 www.gainesvillefl.gov

USE THIS FORM TO: Grant an agent authorization to represent you in applying for applications to the City of Gainesville Department of Sustainable Development.

I /WE				
(pi	rint name of property owner(s))			
hereby authorize.				
hereby authorize:	(print name of agent)			
to represent me/us in processing an application	on for			
to represent mey of in processing an applicant		of application)		
on our behalf. In authorizing the agent to rep	present me/us, I/we, as owner/	owners, attest that the application is		
made in good faith and that any information	contained in the application is a	accurate and complete.		
(Signature of owner)	(Signature of owner)			
(Print name of owner)	(Print name of owner)			
STATE OF FLORIDA SS COUNTY OF ALACHUA				
Sworn to (or affirmed) and subscribed before				
this day of		, 20,		
by				
Notary Public	Printed Name	My Commission Expires		
Personally Known OR				
Produced Identification ID Produced:				