

## City of Cuyahoga Falls Division of Planning & Zoning

2310 Second Street Cuyahoga Falls, OH 44221 330-971-8135/330-971-8366

Application Number (office use):	
Application Date (office use):	

## \$85.00 Design & Historic Review Board - Application for Certificate of Appropriateness

1. Applicar	nt Information (check primary contact)	2. Project Information	
Owner		Property Address:	
Street Address:		Parcel Number Zoning District	
City, State Zip:		Existing Designation	
E-Mail Address:		☐ Proposed Designation (attach designation application form)	
Phone No.	Alt. Phone	Summary of Work Proposed:	
Architect			
Street Address:		Please Attach (10 copies of all paper documents):	
City, State Zip:		Photographs of Before/Existing Conditions: Street View, All	
E-Mail Address:		Elevations, Details Including: Doors, Windows, Masonry	
Phone No.	Alt. Phone	Site Plan (showing lot & building dimensions, proposed	
	-	alterations & additions, landscaping & exterior lighting)	
Street Address:		Building Elevations (showing proposed alterations, exterior	
City, State, Zip:		materials, heights, roof pitch, etc.)	
E-Mail Address:		☐ Architectural Plans (as needed to show exterior impact)	
Phone No	Alt. Phone	Material Samples, Finishes & Colors	
I/we hereby agree to this application are to Permits are issued w indicated on the app utility taps are made	rue and complete and that I have a legal right to make this aparith the understanding that the contractor will assure that the roved plot plan. If sediment and erosion control measures are	nt Code. I also hereby certify that all statements made and attachments on oplication or to possess a written power of attorney on above premises. necessary sediment and erosion control methods are employed, as re not in place, the City will conduct no further inspections. Furthermore, if ubject to monetary fines for each violation and a <a href="Stop Work Order">Stop Work Order</a> will be unty permits and fees are paid.	
Signature		Date	
4. Office L	Jse		
☐ Approved	Signature		
	Date		
	Reason:		
□ Denied			
	By:	Date	
☐ Cash	□Check Check #:	Final Inspection Approval Date:	
☐ MC/Visa/Dis	scover Card #:	Ву	

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