



Borough of Pottstown

*Borough Hall, 100 East High Street
Pottstown, Pennsylvania 19464-9525
610-970-6520 fax 610-970-6599*

Historic Architectural Review Board Certificate of Appropriateness Application

Property Address of Project: _____

Applicant Name _____ **Phone:** _____

Owner(s): _____ **Phone:** _____

Address _____

Contractor Name: _____ **Phone:** _____

Contractor Address: _____

Building Use: _____

Year Built: _____ **Architectural Style:** _____

Type of Work (check all that apply):

- | | | |
|---|--|--|
| <input type="checkbox"/> Addition | <input type="checkbox"/> Door | <input type="checkbox"/> Shutters |
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Window | <input type="checkbox"/> Masonry/Brick |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Roof | <input type="checkbox"/> Porch |
| <input type="checkbox"/> Renovations / Repair | <input type="checkbox"/> Chimney | <input type="checkbox"/> Gutters/ Spouting |
| <input type="checkbox"/> Cornice | <input type="checkbox"/> Lighting | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Sidewalk/Steps | <input type="checkbox"/> Siding/Stucco | <input type="checkbox"/> Fence/Gate/Shed |
| <input type="checkbox"/> Other: _____ | | |

Explain for each class of exterior work.

What steps will be taken to preserve the building's historic character?

(CONTINUED ON REVERSE SIDE)

What you need to submit:

Eight (8) packets, each containing:

- Completed application
- Photographs: ALL public views (show address of property); including CLOSE UP of work area
- Sign rendering with sample lettering (if applying for sign approval)
- Samples or catalog cuts of materials used
- Drawings and/or architectural renderings

THIS APPLICATION WILL NOT BE PROCESSED UNTIL ALL REQUIRED INFORMATION IS COMPLETELY SUBMITTED

****To be listed on the agenda all the above must be submitted at least ten (10) business days prior to the current month's meeting date.****

CERTIFICATION:

I hereby certify that the information contained herein is complete and accurate and that the owner of record of the named property authorizes the work. **Furthermore, I agree to attend the next regular scheduled meeting of the Historical Architectural Review Board to present this application. I understand that failure to appear at the meeting will result in the application being tabled until the next regularly scheduled meeting. Failure to attend two consecutive meetings after acceptance of an application will result in the application being considered withdrawn from consideration.**

Meetings are usually held on the last Tuesday of the month at 7 P.M. in the Borough Hall Council Chambers, Third Floor, unless otherwise advertised. Please call 610-970-6520 to confirm.

When a building permit is required, it is the owner/applicant's responsibility to acquire it. **The permit can only be issued after the Borough Council has issued the Certificate of Appropriateness.** Compliance with all codes is mandatory. **The Certificate of Appropriateness does not give any variances or exceptions.**

Owner's Signature: _____ Date: _____

Applicant's
Signature: _____ Date: _____

Print: _____

(Certifies you have the authority by owner to make application)