

DECATUR HISTORIC PRESERVATION COMMISSION

For Building Department Use Only:

Date Received: _____

By: _____

Meeting Date: _____



DECATUR HISTORIC PRESERVATION COMMISSION CERTIFICATE OF APPROPRIATENESS APPLICATION

Please list your name, email and contact number so we may contact you if we need additional information.

First Name: _____ Last Name: _____

Email Address: _____

Contact Phone Number: _____

Certificates of Appropriateness (CoA's) and items for public discussion must be submitted at least 14 days prior to the scheduled meeting for placement on the agenda. Please submit to the City of Decatur, Building Department, 402 Lee Street, Decatur, AL or by email: Cswope@decatur-al.gov Meetings are held on the second Thursday of each month, at 5:30pm, at the Decatur City Hall, Council Chambers on the first floor, 402 Lee Street NE.

All work specifications must be completed as presented and approved. The commission will not review new CoAs if applicant has a prior CoA out of compliance. In addition to a CoA application, most proposals will require permitting from the Building Department. Building or demolition permits in the historic districts will not be issued without proof of an approved CoA. After application approval, the CoA is valid for one (1) year.

Questions? Please contact the program coordinator at 256-341-4968

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Decatur Historic District Design Review Guidelines:

The Design Review Guidelines for the City of Decatur provide guidance for most commonly proposed changes. The commission consults the design review guidelines when reviewing CoA applications. The guidelines are available at: <https://www.decaturlabamausa.com/departments/historic-preservation-commission/>

Request is to: () repair property () alter property () new construction () demolition () other

Property Location: _____

Owner's Name: _____

Owner's Mailing Address: _____

Owner's Telephone Number: _____

Owner's E-mail Address: _____

Brief description of the work to be performed:

Please fill out *only* if property owner will not be attending the meeting:

Appointed Representative: _____

() Architect () Contractor () Other _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email: _____

DISPOSITION BY DECATUR HISTORIC PRESERVATION COMMISSION

Approved: _____

Disapproved: _____

Approved as Modified: _____

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Incomplete applications will not be accepted. Please review the check list and ensure that all required information is submitted.

() Repairs to existing construction

Required Documentation:

Photographs of **all** building elevations with details of are impacted by the repairs
Dimensioned construction drawings for large projects
Proposed materials/finishes

() Alterations and/or additions to existing construction

Required Documentation:

Photographs of **all** building elevations with details of are impacted by the repairs
Scaled site plan
Dimensioned construction drawings for large projects (floor plans, elevations, roof plan)
Proposed materials/finishes
Historic images if possible

() New buildings or outbuildings (please contact staff for an informal review before submitting a CoA)

Required Documentation:

Scaled site plan
Dimensioned construction drawings for large projects (floor plans, elevations, roof plan)
Proposed materials/finishes

() Alterations or new site features (landscaping, driveways/sidewalks, fences, pools, gazebos, etc.)

Required Documentation:

Scaled site plan
Dimensioned construction drawings for proposed structures like pools, gazebos, etc.
Photographs of building elevations where the work will be located
Proposed materials/finishes

() Demolition of Existing Structure (Demolition is inappropriate unless warranted by structural conditions, endangered public safety, or economic hardship as defined by city ordinance 90-2882A.)

Required Documentation:

Photographs of all building elevations
Condition report compiled by a registered professional per city code section 18-25

() Other (describe)