

CITY OF UTICA
SCENIC & HISTORIC PRESERVATION COMMISSION
CERTIFICATE OF APPROPRIATENESS APPLICATION

PROPERTY ADDRESS: _____



NAME: _____ ADDRESS: _____

**APPLICANT
INFORMATION**

PHONE: _____

APPLICANT IS: OWNER _____ CONTRACT PURCHASER _____

 LESSEE _____ CONTRACTOR/ARCHITECT _____

*ALL CORRESPONDENCE WILL BE SENT TO THIS PERSON UNLESS OTHERWISE SPECIFIED



*TO BE COMPLETED ONLY IF THE APPLICANT IS NOT THE OWNER

**OWNER
INFORMATION**

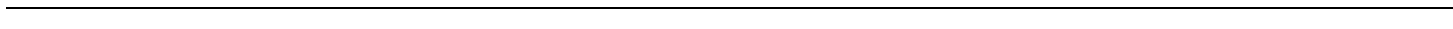
NAME: _____ ADDRESS: _____

PHONE: _____



HISTORY OF THE PROPERTY

BRIEF DESCRIPTION OF THE PROPOSED ACTION



AFFIRMATION

I, THE UNDERSIGNED, DO HEREBY AFFIRM THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND I FURTHER UNDERSTAND THAT INTENTIONALLY PROVIDING FALSE OR MISLEADING INFORMATION IS GROUNDS FOR IMMEDIATE DENIAL OF MY APPLICATION.

APPLICANT'S SIGNATURE

SWORN TO BEFORE ME THIS _____ DAY OF _____, 2002

CODES STAMP

PLANNING BOARD

NOTARY
PUBLIC

COMMISSIONER
OF DEEDS

MY COMMISSION EXPIRES _____

NOTE: COMPLETED APPLICATION FORM AND ALL REQUIRED DOCUMENTATION MUST BE SUBMITTED BY _____ IN ORDER TO BE PLACED ON THE COMMISSION AGENDA FOR THE _____ MEETING.

APPLICATION FEE: \$ 35.00



FOR INFORMATION OR ASSISTANCE IN COMPLETING THIS APPLICATION, PLEASE CONTACT:

DEPARTMENT OF URBAN & ECONOMIC DEVELOPMENT
ATTN: MR. DAVID H. WILLIAMS, CHAIRPERSON
UTICA CITY HALL
1 KENNEDY PLAZA
UTICA, NEW YORK 13502 315-792-0181



STAFF USE ONLY

OFFICIAL PROPERTY ADDRESS _____ ZONING DISTRICT _____

COUNTY TAX MAP # (s) _____ COUNCILMANIC DISTRICT _____

HARDSHIP APPLICATION: YES NO

ADDITIONAL ACTIONS REQUIRED: VARIANCE SITE PLAN OTHER

CASE NUMBER: _____

APPLICATION CHECKLIST CERTIFICATE OF APPROPRIATENESS

SUBMISSION REQUIREMENTS:

1. Completed and signed application form
2. Where the proposed action involves the demolition of a structure or building, an addition to a structure or building or new construction of a structure or building, a detailed site plan drawn to scale or with all measurements clearly labeled. The site plan should show, at a minimum, the footprint of all buildings and structures on the site (with any additions or new construction noted), all available on-site parking and site ingress/egress.
3. A detailed description of the proposed action
4. Elevation drawings, including relationship to adjacent properties
5. Perspective drawings, including relationship to adjacent properties
6. Samples of all materials and colors to be used
7. Where the proposed action includes signs or lettering, a scale drawing showing the type of lettering to be used, all dimensions and colors, a description of materials to be used, method of illustration and a plan showing the sign's location on the property
8. A completed Environmental Assessment Form (EAF), if required
9. Photographs of the subject property
10. Any additional information that the applicant feels the Scenic and Historic Preservation Commission may find useful in rendering a decision
11. Other

PLEASE COMPLETE THE APPLICATION AND RETURN WITH THE REQUIRED APPLICATION FEE (\$ 35.00) AND ALL NECESSARY INFORMATION LISTED ABOVE, TO:

DEPARTMENT OF URBAN & ECONOMIC DEVELOPMENT
ATTN: BUREAU OF PLANNING
1 KENNEDY PLAZA
UTICA, NEW YORK 13502

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE BUREAU OF PLANNING AT (315) 792-0181.

DO NOT WRITE BELOW THIS LINE

DATE RECEIVED _____ BY _____

APPLICATION FEE _____ CHECK & # _____ MONEY ORDER _____ CASH _____

OTHER APPROVALS NECESSARY

SEQRA	YES _____	NO _____	TYPE OF ACTION	I _____	II _____	UNLISTED _____
239 (l) or (m)	_____	_____	IF YES, DATE SENT	_____ RECEIVED _____		
ZONING BOARD	_____	_____	IF YES, AGENDA DATE	_____ USE / AREA / SPECIAL		
SCENIC/HISTORIC	_____	_____	IF YES, AGENDA DATE	_____		
SIGN PERMIT	_____	FENCE PERMIT	_____	BUILDING PERMIT	_____	CURB CUT

OTHER CITY DEPARTMENT REVIEW

	YES	NO				
ENGINEERING	_____	_____	IF YES, DATE SENT	_____ RECEIVED _____		
CODES	_____	_____	IF YES, DATE SENT	_____ RECEIVED _____		
POLICE/FIRE	_____	_____	IF YES, DATE SENT	_____ RECEIVED _____		