

CERTIFICATE OF APPROPRIATENESS (COA) APPLICATION

City of Bellevue – Historic Preservation Office 616 Poplar Street – Bellevue, KY 41073 Phone: (859)-292-3880 Fax: (859)-547-1868 Email: khunter@campbellcountyky.gov

APPLICATION SHALL BE SUBMITTED NO LATER THAN TEN (10) DAYS PRIOR TO MEETING DATE

COA Application #: _____

| PROPERTY IMPROVEMENT INFORMATION | | | |
|---|--|---|--|
| | IVII KO V E | | Pallarma VV 41072 |
| Property Address: | | | Bellevue, KY 41073 |
| Current Use: | | | |
| IMPROVEMENT TYPE / WORK DESCRIPTION | | Describe work proposed below and <u>attach additional plans</u> (i.e. materials, design drawings, specifications, photos, etc.) | |
| Alteration (visible changes to exterior) | | | |
| General Maintenance Re-Roofing, Wood Repair, Exterior Painting, | Misc. | | |
| Other Modifications Pools, Fencing, Driveways, Landscaping, etc. | | | |
| New Construction New Building, Addition, Accessory Structu | re | | |
| Demolition | | - | |
| ESTIMATED COST: \$ | | | |
| APPLICANT INFORMATION (PLEA | SE PRINT) | | |
| 1.1 | actor | | |
| Architect Consultant Other | | | |
| Owner's Name: | | | |
| Address: | | | |
| City: State: Zip | | | |
| Telephone: Cell: | | | |
| Email: | | - | |
| Applicant's Name: | | | |
| Address: State: Zip | • | | |
| Telephone: Cell: | | | |
| Email: | | | |
| Contractor: | | | |
| Contact: | | I have reviewed the Bellev | ue Design Guidelines |
| Occupational License #: | | I or my representative will | attend the Historic |
| City: State: Zip | | Preservation Commission | |
| Telephone: Cell: | | I am applying for Federal of | • |
| Email: | | Preservation Tax Credits | of State Historic |
| I understand this application will not be accessupplied, including any additional plans. Fadelays and/or denial of request. I also under and a public hearing by the Bellevue Historic this Certificate of Appropriateness I will contain and make the proposed improvement according | epted and produiture to supply rstand this applic Preservation mply with all a | y adequate additional plans coul- dication may require a site visit/ a Commission. I hereby certify applicable laws and codes, inclu | d result in processing additional information that as an applicant for |
| SIGNATURE OF OWNERS(S) | DATE | SIGNATURE OF A CENT(S) | DATE |