



COMMISSION OF ARCHITECTURAL REVIEW

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

PROPERTY (location of work)

Address 603 1/2 N 23rd St
Historic district: Union Hill

Date/time rec'd: _____
Rec'd by: _____
Application #: _____
Hearing date: _____

APPLICANT INFORMATION

Name: Will Payne
Company: N/A
Mailing Address: 603 1/2 N 23rd St

Phone: 719.239.0796
Email: willgpayne@gmail.com
Applicant Type: Owner Agent
 Lessee Architect Contractor
 Other (please specify):

OWNER INFORMATION (if different from above)

Name
Mailing Address

Company
Phone
Email

PROJECT INFORMATION

Review Type: Conceptual Review Final Review
Project Type: Alteration Demolition

New Construction
(Conceptual Review Required)

Project Description: (attach additional sheets if needed)

A new storage shed located at the rear of the property.

ACKNOWLEDGEMENT OF RESPONSIBILITY

Compliance: If granted, you agree to comply with all conditions of the COA. Revisions to approved work require staff review and may require a new application and CAR approval. Failure to comply with the COA may result in project delays or legal action. The COA is valid for one (1) year and may be extended for an additional year, upon written request.

Requirements: A complete application includes all applicable information requested on checklists to provide a complete and accurate description of existing and proposed conditions. Applicants proposing major new construction, including additions, should meet with Staff to review the application and requirements prior to submitting an application. Owner contact information and signature is required. Late or incomplete applications will not be considered.

Zoning Requirements: Prior to Commission review, it is the responsibility of the applicant to determine if zoning approval is required and application materials should be prepared in compliance with zoning.

Signature of Owner

Date



