

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS (COA)

Building address 407 Center St
Owner of building George White Phone
Owner's email & mailing address
Applicant Paul Wright Roofing Phone:
Applicant's email & mailing address 1531 Eaton Ave
Street and Number City State Zip Code

APPLICANT MUST ATTEND MEETING FOR CASE TO BE HEARD.
USE THE CHECKLIST ON THE BACK OF THIS APPLICATION TO ENSURE YOUR SUBMISSION IS COMPLETE.

Application form, photographs, and drawings must be submitted (see attached for deadline) prior to the regular scheduled meeting in order to be placed on the agenda for the next meeting.

1. PHOTOGRAPHS - Photographs of your building and neighboring buildings must accompany your application.

2. TYPE OF WORK PROPOSED - Check all that apply. Please bring any samples or manufactures specifications for products you will use in this project.
Trim and decorative woodwork Skylights
Siding and Masonry Metal work
X Roofing, gutter and downspout Light fixtures
Windows, doors, and associated hardware Signs
Storm windows and storm doors Demolition
Shutters and associated hardware Other
Paint (Submit color chips - HARB only)

3. DRAWINGS OF PROPOSED WORK - Required drawings must accompany your application. Please submit ONE ORIGINAL AND TEN (10) COPIES OF DRAWINGS, PHOTOGRAPHS, APPLICATION FORM, AND ANY SPECIFICATIONS
Alteration, renovation, restoration (1/4 or 1/8"=1'0" scale drawings required IF walls or openings altered.)
New addition (1/4" or 1/8"=1'0" scale drawings: elevations, floor plans, site plan)
New building or structure (1/4" or 1/8"=1'0" scale drawings: elevations, floor plans, site plan)
Demolition, removal of building features or building (1/4" or 1/8"=1'0" scale drawings: elevation of remaining site and site plan)
A scale drawing, with an elevation view, is required for all sign submittals

4. DESCRIBE PROJECT - Describe any work checked in #2 and #3 above. Attach additional sheets as needed.
remove slate from all facets + replace with slate/line shingles

5. APPLICANT'S SIGNATURE DATE: 3/27/23
OWNER'S SIGNATURE DATE: 3/27/2023

**APPLICATION FOR CERTIFICATE OF APPROPRIATENESS (COA)**

Building address 409 Center SE  
 Owner of building Beahl Fowler Phone \_\_\_\_\_  
 Owner's email & mailing address 409 Center SE Bethlehem  
 Applicant Paul Wright Postins Phone: \_\_\_\_\_  
 Applicant's email & mailing address 1531 Eaton AVE  
Street and Number City State Zip Code

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**1. PHOTOGRAPHS** - Photographs of your building and neighboring buildings **must accompany** your application.

**2. TYPE OF WORK PROPOSED** – Check all that apply. Please bring any samples or manufactures specifications for products you will use in this project.

<input type="checkbox"/> Trim and decorative woodwork	<input type="checkbox"/> Skylights
<input type="checkbox"/> Siding and Masonry	<input type="checkbox"/> Metal work
<input checked="" type="checkbox"/> Roofing, gutter and downspout	<input type="checkbox"/> Light fixtures
<input type="checkbox"/> Windows, doors, and associated hardware	<input type="checkbox"/> Signs
<input type="checkbox"/> Storm windows and storm doors	<input type="checkbox"/> Demolition
<input type="checkbox"/> Shutters and associated hardware	<input type="checkbox"/> Other _____
<input type="checkbox"/> Paint (Submit color chips – HARB only)	

**3. DRAWINGS OF PROPOSED WORK** – Required drawings **must accompany** your application. Please submit **ONE ORIGINAL AND TEN (10) COPIES OF DRAWINGS, PHOTOGRAPHS, APPLICATION FORM, AND ANY SPECIFICATIONS**

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 A scale drawing, with an elevation view, is required for all sign submittals

**4. DESCRIBE PROJECT** – Describe any work checked in #2 and #3 above. Attach additional sheets as needed.  
*remove slate from rear (Alley) slope & replace with slate/shingles*

**5. APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**OWNER'S SIGNATURE** Beahl Fowler **DATE:** \_\_\_\_\_











