

**Application for Certificate of Appropriateness
City of Lima
Lima Design Review Board**

1. Person Submitting/
Name of Property _____ Date: _____

2. Address of Property: _____

3. Owner of Property: _____

First Name	Last Name	

Street Address		

City	State	Zip

Phone Numbers: _____

Home	Business
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4. Name of business(es) and owner(s) housed in property:

Name	Owner

Name	Owner

Name	Owner

5. Have you reviewed the Design Guidelines and the Board's Rules and Regulations? Yes No

6. Is the building on the National Register of Historic Places? Yes No Unsure

7. Scope of project to include: (please check appropriate areas)

- | | |
|---|--|
| <input type="checkbox"/> Building Demolition
<input type="checkbox"/> Site Development after demolition
<input type="checkbox"/> New Construction and/or Addition
<input type="checkbox"/> Awnings
<input type="checkbox"/> Signage
<input type="checkbox"/> Doors, Windows, Entrances
<input type="checkbox"/> Roofing
<input type="checkbox"/> Painting | <input type="checkbox"/> Façade Restoration / Alterations
<input type="checkbox"/> Side or Rear Treatments
<input type="checkbox"/> Site Development
<input type="checkbox"/> Landscaping
<input type="checkbox"/> Parking Lot Layout
<input type="checkbox"/> Lighting
<input type="checkbox"/> Facade
<input type="checkbox"/> Awning
<input type="checkbox"/> Ground |
|---|--|

8. Briefly explain the proposed work:

9. Please submit the following information:

- One (1) historical (if available) and one (1) modern photograph
- Ten (10) copies of proposed elevation views, with description of materials and colors included on elevation
- Ten (10) copies of site plans (if applicable)

10. Estimated starting date of project: _____

11. Estimated completion date of project: _____

12. Are you aware of the various financial incentives that may be available for this project? Yes No
If no, contact the Lima Department of Community Development for further information **BEFORE** starting work.
419-221-5146

NOTE: The City has certain criteria for these projects. Your plans and applications need to reflect these stipulations.

13. Do you have any questions or concerns?

I understand the criteria for this application, approval, and reviews by the Design Review Board and agree to be subject to the Downtown Lima Design Guidelines for the above described work in accordance with City Ordinance Section 1409, as amended.

Signed: _____ Date: _____
Applicant Signature

Property Owner (if different from applicant)

NOTE: Upon approval of the application a certificate of approval will be issued. Work cannot start until the applicant receives this approval. No building permits will be issued without a certificate of approval.

Please submit application to the City of Lima Building Commissioner located at 50 Town Square, Lima, OH 45801

FOR OFFICIAL USE ONLY:

Date received by Board: _____ Application Number: _____

Approved as submitted, no modifications: _____

Approved as noted, with modifications as agreed to: _____

Denied as currently submitted: _____

Signed: _____ Date: _____
Chair, Design Review Board