



Application for a CERTIFICATE OF APPROPRIATENESS

P.O. Drawer 357
201 South Main Street
Graham, NC 27253
(336) 570-6705
Fax (336) 570-6703
www.cityofgraham.com

The Historic District Commission (HDC) processes applications for Certificates of Appropriateness within the Courthouse Square Historic District for (1) any changes in the external appearance of existing structures; (2) design of new structures; and (3) demolition of existing structures. Regulations for Certificates of Appropriateness can be found in Article IV, Division 10, Historic District Commission, of the Development Ordinances.

Property

Street Address: 123 W. Main St.

Property Owner: (Sarah) Evans

Project

General description of each modification or improvement:

*would like to have
an internally illuminated
sign*

RECEIVED

OCT 08 2014

CITY OF GRAHAM
INSP. / P.Z.

If a site plan is required, has it been submitted? Yes No

Is there any approval pending by any other regulatory or administrative authority which may have a bearing on the proposed project? Yes No If yes, please specify:

EXHIBITS: This application **must be accompanied** by sketches, drawings, photographs, specifications, descriptions, etc. of the proposed project, which must be sufficiently detailed for the Commission to evaluate the proposal against the criteria established in Sec. 10.211 of the Development Ordinances. **See the back of this application for a checklist of required exhibits.** There are 5 for signs, 6 for minor alterations, and 10 for new construction, additions or major alterations.

Applicant

Name: (Sarah) Evans

Property Owner Lessee Other _____

Mailing Address: 410 FOUR SEASONS 337A

City, State, Zip: Grahnboro, NC 27407

Phone # 336 986-2139

Email: STBRecords@gmail.com

I, the applicant, hereby make application for a Certificate of Appropriateness for a Sign Minor Alteration New Construction, Addition or Major Alteration

I, the applicant, understand that this application cannot be processed unless and until it is complete, including all required exhibits, and it has been submitted at least 10 calendar days before the Commission meeting.

(Sarah) Evans 10/8/14
Signature of Applicant Date

Signature of Owner, when applicable Date

Representation at HDC Meeting

Who will represent the applicant at the HDC meeting? *Should have the authority to commit the applicant to make changes that may be suggested or required by the Commission.*

Name: (Sarah) Evans

Relationship to Applicant: self

Phone # 336 986 2139

Email: STBRecords@gmail.com

FOR OFFICE USE ONLY	
Received by: <u>MG</u>	Remarks: <u>COA 1407</u>
Received date: <u>10-8-2014</u>	
Tax Map #	
HDC date: <u>10-22-2014</u>	

800sf

x 520

40sf may

26.6sf ✓

how far from wall? ✓

40'

20' 1

STB RECORDS

ADMISSION 14

C

