



HD _____
(For office use only)

Historic District Commission
Application for Certificate of Appropriateness
Minor Work (Section 17-96)
Short Form

This form must be completed and filed in the Planning Department Office pursuant to the Ordinance.

Property Location (Street Address) _____

Property Owner's Name _____

Address _____

Telephone (W) _____

(H) _____

Name of Business (if applicable) _____

Minor work items require Certificate of Appropriateness but may be approved by an administrative official designated by the Commission if the work is consistent with the review criteria. Minor work consists of various minor projects where the exterior appearance of the structure or landscape is not significantly changed, including but not limited to the items listed below. *Please circle the item best suited to your request.*

1. Side and rear yard fences and walls
2. Landscaping project including removal of trees eight (8) inches or greater in diameter at the base.
3. New roof coverings involving a change in the material used or its color.
4. Installation of mechanical equipment.
5. Chimney and foundation repairs including vents and access doors.
6. Site improvements, including but not limited to satellite dishes, swimming pools, tennis and basketball courts and outdoor hot tubs.
7. Painting of new construction and repainting existing colors other than to white or the original colors.
8. Installation of artificial siding.
9. Exterior lighting fixtures.
10. Removal of asbestos or other artificial siding.
11. Replacement of exterior stairs, landings and steps.
12. Other: _____

Exterior Alteration of Existing Structure

Describe clearly and in detail all exterior architectural alterations to be made. Drawings, photographs, specifications MUST accompany this application, and any other graphic information deemed appropriate. Include information on materials, paint colors, and, if necessary, information on and location of significant, large trees on site, parking areas, etc.

****Applications without the abovementioned attachments or that do not provide a clear description will be considered incomplete and will not be processed until all pertinent information is provided.**

Staff Recommendation:

Applicant _____
Address _____
Telephone (H) _____ (B) _____

I hereby give Planning staff and/or Historic District Commissioners permission to enter the property to collect information specific to this request.

Date Submitted Signature of Applicant

Date Received Signature (Secretary or Agent)
Gastonia Historic District Commission

Please return to: Historic District Commission
City of Gastonia Planning Department
PO Box 1748
Gastonia, NC 28053

Applications to be heard by the full Historic District Commission must be received 14 days prior to the regularly scheduled meeting, which is the fourth Thursday of every month.