

**MILLEDGEVILLE HISTORIC PRESERVATION COMMISSION**  
**Application for Certificate of Appropriateness**

**Instructions:**

Property or Business Owner is responsible for providing the following information when proposing exterior signs, exterior material changes, or exterior alterations to any property located in the (LOCAL) Milledgeville Historical District bounded by a line in the middle of the streets on the north by Thomas Street, on the east by Elbert Street, on the south by Franklin Street, and on the west by Central of Georgia railroad tracks. *A Certificate of Appropriateness will be conditioned on receiving the required building permit.*

**The Property:**

1. Address if Local Historic District property:

\_\_\_\_\_

2. Attach map with location clearly marked by an "X"

3. Property is zoned: (Please circle one):    Residential            Commercial            Institutional

4. Building:

Condition: \_\_\_\_\_ Age: \_\_\_\_\_

5. What is the building's historic and architectural significance (see historic resource survey)?

\_\_\_\_\_  
\_\_\_\_\_

**The Applicant:**

6. Property Owners Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Business/Representative Name (if applicable): \_\_\_\_\_

Business/Lessee Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Person(s) from Milledgeville Historic Preservation Commission, if any, with whom Applicant has discussed this request: \_\_\_\_\_

**The Proposed Work:**

7. Nature of work (check appropriate items):

____ New Construction	____ Signs
____ Demolition	____ Awning/Canopy
____ Relocation of Structure	____ Removal of Mature Tree
____ Exterior Repairs/Material Changes	____ Other Structural/Landscape (Explain)
____ Exterior Alterations	_____
____ Walk, Fence, Drive, etc.	_____

8. Proposed material changes (describe any applicable):

	Existing	Proposed
Foundation	_____	_____
Exterior Framing	_____	_____
Roof Type	_____	_____
Door(s)	_____	_____
Windows	_____	_____
Other	_____	_____

9. Briefly describe repairs and/or modifications. *Before the Commission can decide on the request, members must understand the nature of the work to be done as would the builder or contractor.*

Estimated cost \$ \_\_\_\_\_ Who made the cost estimate? \_\_\_\_\_  
\_\_\_\_\_

10. For information and guidance, the U S Secretary of the Interior’s “Standards for the Treatment of Historic Properties” the “Guidelines for Rehabilitation and New Construction in Milledgeville Historic District” and the “HPC Rules of Procedure” are located in the Planning and Development Department of the City of Milledgeville. Telephone (478) 414-4021.

Would applicant like to review these documents?

Yes ( ) No ( ) Already reviewed ( )

11. Detailed sketch/plans showing proposed work attached? ( ) Yes ( ) No (Explain)

\_\_\_\_\_  
\_\_\_\_\_

Are material samples available for review, if applicable? ( ) Yes ( ) No (Explain)

\_\_\_\_\_  
\_\_\_\_\_

11. Other comments:

\_\_\_\_\_  
\_\_\_\_\_

I/We the undersigned, certify that the above information, to the best of my/our knowledge is true and correct.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed By HPC: \_\_\_\_\_ Date: \_\_\_\_\_

If formal hearing is required: *Scheduled for (the second Thursday of each month)*

*Thursday, \_\_\_\_\_ at 5:00 p.m. in the second floor conference*

*room at City Hall. Applicant or applicant’s designated representative must be present at the*

*hearing. Applications must be returned to the Planning & Development Department **within fifteen***

*(15) working days prior to meeting.*