



# *The* CITY OF PARIS

## APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Date: \_\_\_\_\_

### NOTICE TO APPLICANT

1. Completed applications and drawings must be in the Community Development Office no later than 10 days before the meeting. (Meetings are held each month on the 2nd Wednesday at 12:00 p.m. and 4th Monday at 4:00 p.m. in the City Hall Council Chambers.)
2. It is imperative that you complete this application in its entirety. Incomplete applications will be returned and could delay the commencement of your project.
3. The presence of the applicant or his/her agent as designated herein is necessary at the Historic Preservation Commission Meeting.

### APPLICANT/PROPERTY OWNER CONTACT INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Fax: \_\_\_\_\_

### PROJECT INFORMATION

Name of Business (if applicable): \_\_\_\_\_

Current or intended use of the building: \_\_\_\_\_

Address of Project: \_\_\_\_\_

*(The below information (Lot, Block, Subdivision, and Frontage) can be obtained on the Lamar County Appraisal District's website by entering the physical address of the property:*

*<http://clientdb.trueautomation.com/clientdb/main.asp?id=7>*

*If you do not have access to the Internet or cannot locate this information on the website, contact the Community Development Department at (903) 784-9234 for assistance. Zoning and Historic District information can be completed by the Community Development Department at the time you submit your application.)*

Lot \_\_\_\_\_, Block \_\_\_\_\_, Subdivision \_\_\_\_\_ Zoning: \_\_\_\_\_

Which Historic District is the property located within?

- Downtown Historic District
- Church Street Historic District
- Stand-Alone Designation

Select the type of project and complete the appropriate sections related thereto:

**Remodeling/Renovating**

Provide a detailed description of the nature of the proposed external alterations and /or repairs (attach additional sheets if necessary):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Are you painting an exterior feature?      YES      NO

If YES:

	<i>Describe Feature</i>	<i>Color Name</i>	<i>Sample Attached</i>	
Ex.	<u>Window and door frames</u>	<u>SW Autumn Hue (No. 7665)</u>	<u>YES</u>	<u>NO</u>
	_____	_____	YES	NO
	_____	_____	YES	NO
	_____	_____	YES	

Are you replacing an exterior feature?      YES      NO

If YES:

	<i>Describe Feature</i>	<i>Current Material</i>	<i>Proposed Material</i>	<i>Sample Attached</i>	
Ex.	<u>Window frame</u>	<u>Wood</u>	<u>Vinyl</u>	<u>YES</u>	<u>NO</u>
	_____	_____	_____	YES	NO
	_____	_____	_____	YES	NO
	_____	_____	_____	YES	NO

Required attachments:

- Current photographs of the property
- If available, historic photographs of the property
- Samples of materials to be used

**New Construction**

Are you replacing an existing structure?      YES      NO

If YES, complete "Demolition" below.

Required attachments:

- Current photographs of the property
- If available, historic photographs of the property
- Site Plan indicating the following:
  - Size, shape, and dimensions of the lot on which the building will be located (check official plat records)
  - Location and width of all easements (check official plat records)
  - Location of building setback lines (Zoning Ordinance No. 1710)
  - Location and dimensions of all existing buildings, parking areas, and existing signs (if any)
  - Location, size, and height of the proposed structures
  - The exact distance the proposed structures will be from the platted lot lines
- Architect's rendering or scale drawing of proposed construction
- Sample board of materials and colors to be used

**Demolition**

Describe the condition of the existing structure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the estimated cost of restoration or repair of the existing structure? \_\_\_\_\_

Explain why the property is being demolished as opposed to restored or renovated for adaptive reuse:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you plan to do to mitigate the loss of the landmark structure? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Required attachments:

- Current photographs of the property (photographs should be taken from all possible angles)
- If available, historic photographs of the property

**Sign**

Type of Sign:

- |                                        |                                          |
|----------------------------------------|------------------------------------------|
| <input type="checkbox"/> Attached Sign | <input type="checkbox"/> Sky Sign        |
| <input type="checkbox"/> Pole Sign     | <input type="checkbox"/> Temporary Sign  |
| <input type="checkbox"/> Ground Sign   | <input type="checkbox"/> Other (Specify) |
| <input type="checkbox"/> Banner        | _____                                    |

Sign Dimensions: \_\_\_\_\_ Total Square Footage \_\_\_\_\_

Will the sign be connected to electricity or lit in any way? YES NO

If YES, what is the method of lighting? \_\_\_\_\_  
\_\_\_\_\_

Will this sign project over a public sidewalk? YES NO

If YES, what is the distance from the sidewalk to the bottom of the sign? \_\_\_\_\_

Required attachments:

- Current photographs of the property
- If available, historic photographs of the property
- Site drawing indicating the following:
  - Pole Sign, Ground Sign, Banner, Temporary Sign, etc.:
    - Size, shape, and dimensions of the lot on which the sign will be located (check official plat records)
    - Location and dimensions of all existing buildings, parking areas, and existing signs (if any)
    - Location, size, and height of the proposed sign
    - The exact distance the proposed sign will be from the platted lot lines
  - Attached Sign:
    - Drawing of the entire face of the building on which the sign will be attached, including the dimensions of the building face
    - Drawing of the proposed sign on the building
    - Size and dimensions of the proposed sign
- Sign contractor's rendering or scale drawing of proposed sign
- Sample of materials and colors to be used

Have you submitted an application for a Sign Permit to the Building Division? YES NO

**Fence**

What is the proposed material and style of fence you intend to install? \_\_\_\_\_  
\_\_\_\_\_

What is the proposed height of the fence? \_\_\_\_\_  
\_\_\_\_\_

Are you replacing an existing fence? YES NO

If YES, what is the current fence material? \_\_\_\_\_

Required attachments:

- Current photographs of the property
- If available, historic photographs of the property
- Site drawing indicating:
  - Size, shape, and dimensions of the lot on which the fence will be located (check official plat records)

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- Location, size, and height of the proposed fence
- Samples of materials to be used (or alternatively, a photograph showing the style and color of
- Other

Provide a detailed description of the nature of the proposed project (attach additional sheets if necessary):

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

Required attachments:

- Current photographs of the property
- If available, historic photographs of the property
- Samples of materials to be used

Intended start and finish dates: Start \_\_\_\_\_ Finish \_\_\_\_\_

**I have carefully read the complete application and know the same is true and correct. I understand the ordinances governing the activity described in this application, and I agree to comply with all provisions of the City ordinances, State laws, and all property restrictions, whether herein specified or not. As the owner of the above property or a duly authorized agent, I hereby grant permission to the City of Paris to enter the premises and make all necessary inspections.**

**X** \_\_\_\_\_  
(Owner or Authorized Agent)

**RETURN TO:**

**City of Paris Community Development Department  
P. O. Box 9037  
150 1st Street S.E.  
Paris, TX 75461  
(903) 784-9203**

**For Commission Use Only:**

COA # \_\_\_\_\_

- Approved as Submitted
- Approved with the following conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Denied for the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Approved Administratively (Ordinary Maintenance)

\_\_\_\_\_  
Commission Chairman/HPO

\_\_\_\_\_  
Date