



City of Villa Rica

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Please complete the blanks with the information requested. If any of the information or required materials is missing or incomplete, the application will not be processed. Also, please note the required information requested on the back of this page.

Date of Application: _____

APPLICANT

Applicant Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: () _____ - _____ Fax: () _____ - _____
 Email Address: _____
 Owner's Name (If different than the applicant): _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: () _____ - _____ Fax: () _____ - _____
 Email Address: _____
 NOTE: A notarized statement signed by the property owner(s) authorizing the Applicant to make this request shall be attached to the application).

PROPERTY INFORMATION

Property Address: _____ City: _____ State: _____ Zip: _____
 Parcel Number: _____ County: _____
 Zoning District: _____ General Plan Designation: _____
 Age of Building: _____ Relocated or Original Site: _____
 Unique Characteristics or History: _____
 Detailed Project Description: _____

I, _____, hereby state that all of the above statements and statements contained in the document submitted with this application are true.

Signature of Applicant

Date



Case # _____

CERTIFICATE OF APPROPRIATENESS REVIEW

REQUIRED MATERIALS TO ACCOMPANY THE APPLICATION

The Community Development Director may waive informational requirements upon finding the information is not required to determine compliance with the Zoning Ordinance requirements.

1. Copy of deed, lease, option agreement or other evidence of ownership or applicant’s interest in the property. If the applicant is not the owner, attached a notarized statement signed by the owner authorizing the applicant to request the amendment;
2. Photographs of the building and existing conditions from all relevant sides;
3. A written statement describing the following:
 - a. The proposed change and the effect the proposed change may have on surrounding properties and a statement of the facts indicating that the proposed change will not be detrimental to the general public interest and the purposes of this Code;
 - b. Whether such change is consistent with the intent and the purpose of this Code and the goals and policies of the Comprehensive Plan;
 - c. The areas which are most likely to be directly affected by such change and the likely effects;
4. If installing signage or graphics on a building or on the site, or directly behind the window or on a window, a drawing of the signage;
5. Historic plans, elevations or photographs;
6. Name and address of adjacent property owners;
7. Filing fee of \$_____.

NOTE: IF YOUR PROJECT GOES TO CITY COUNCIL, YOU WILL BE NOTIFIED BY MAIL IN ADVANCE OF THE HEARING DATE. IF YOU WOULD LIKE TO CHECK MEETING AGENDAS, PLEASE GO TO OUR WEBSITE: WWW.VILLARICA.ORG.

Return Form Information:

Villa Rica Historic Preservation Commission
City of Villa Rica
517 W. Bankhead Highway
Villa Rica, GA 30180
Phone: (678) 840-1238
Fax: (770) 459-7003

OFFICE USE: Total Amount Paid: _____ Cash Check Check Card Receipt #: _____

Application Checked by: _____ Date: _____ Map Number(s): _____

Planning Commission: Approved Denied Date: _____

Conditions: No Yes How Many: _____

City Council Decision: Approved Denied Date: _____

Conditions: No Yes How Many: _____

Planning Manager’s Signature: _____

Date: _____