

<p>Certificate of Appropriateness (COA) Application Bardstown Historical Review Board City of Bardstown 220 North Fifth Street Bardstown, Kentucky 40004 Telephone: (502) 348-5947 Fax: (502) 348-2433 Email: rjennings@bardstowncable.net</p>	<p style="text-align: right;"><i>For Office Use Only</i></p> <p>Application #: _____</p> <p>Date Filed: _____</p> <p>Meeting Date: _____</p> <p>Filing Fee: _____</p>
<p style="text-align: center;"><i>Please type or print (blue or black ink)</i></p> <p style="text-align: right;">Application Date: _____</p>	

Instructions	Applicant Information																																																			
<p>Provide the Applicants Name, contact person, mailing address, telephone, and email address. Use additional sheets if necessary.</p> <p>If the Applicant is not the property owner, provide the Owner's name, address, telephone, and email address. THE OWNER MUST SIGN THE COA APPLICATION.</p> <p>If an Architect or other design professional represents the Applicant, provide the name, firm name, address, telephone, and email address.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="3">Applicant's Name:</td></tr> <tr><td colspan="3">Contact Person:</td></tr> <tr><td colspan="3">Mailing Address:</td></tr> <tr> <td style="width: 33%;">City:</td> <td style="width: 33%;">State:</td> <td style="width: 33%;">Zip:</td> </tr> <tr> <td>Phone:</td> <td colspan="2">Email:</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3">Owner's Name:</td></tr> <tr><td colspan="3">Contact Person:</td></tr> <tr><td colspan="3">Mailing Address:</td></tr> <tr> <td>City:</td> <td>State:</td> <td>Zip:</td> </tr> <tr> <td>Phone:</td> <td colspan="2">Email:</td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3">Contractor/Representative:</td></tr> <tr><td colspan="3">Business Name:</td></tr> <tr><td colspan="3">Mailing Address:</td></tr> <tr> <td>City:</td> <td>State:</td> <td>Zip:</td> </tr> <tr> <td>Phone:</td> <td colspan="2">Email:</td> </tr> </table>	Applicant's Name:			Contact Person:			Mailing Address:			City:	State:	Zip:	Phone:	Email:					Owner's Name:			Contact Person:			Mailing Address:			City:	State:	Zip:	Phone:	Email:					Contractor/Representative:			Business Name:			Mailing Address:			City:	State:	Zip:	Phone:	Email:	
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<p>Identify property address.</p> <p>Specify project type and provide project description.</p> <p>Indicate the property's current zoning classification and proposed use.</p> <p>Indicate if the property requires a zone change, conditional use permit and/ or variance.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="3">Property Address:</td></tr> <tr><td colspan="3"> </td></tr> <tr> <td style="width: 33%;">Property type:</td> <td style="width: 33%;"> <input type="checkbox"/> Exterior structure alteration </td> <td style="width: 33%;"> <input type="checkbox"/> New construction or addition </td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Site alteration/improvement </td> <td> <input type="checkbox"/> New construction </td> </tr> <tr> <td></td> <td> <input type="checkbox"/> Demolition </td> <td> <input type="checkbox"/> Signage </td> </tr> <tr> <td></td> <td colspan="2"> <input type="checkbox"/> Other (specify below) </td> </tr> <tr><td colspan="3">Property description:</td></tr> <tr><td colspan="3"> </td></tr> <tr> <td><input type="checkbox"/> Zone Change</td> <td colspan="2">If yes, indicate proposed zoning:</td> </tr> <tr> <td><input type="checkbox"/> Variance</td> <td colspan="2">If yes, indicate variance type:</td> </tr> <tr> <td><input type="checkbox"/> Conditional Use:</td> <td colspan="2">If yes, indicate CUP type:</td> </tr> </table>	Property Address:						Property type:	<input type="checkbox"/> Exterior structure alteration	<input type="checkbox"/> New construction or addition		<input type="checkbox"/> Site alteration/improvement	<input type="checkbox"/> New construction		<input type="checkbox"/> Demolition	<input type="checkbox"/> Signage		<input type="checkbox"/> Other (specify below)		Property description:						<input type="checkbox"/> Zone Change	If yes, indicate proposed zoning:		<input type="checkbox"/> Variance	If yes, indicate variance type:		<input type="checkbox"/> Conditional Use:	If yes, indicate CUP type:	
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Required Supporting Documentation	
The Applicant must submit all application documentation listed below with the completed and signed application. Incomplete applications will not be considered by the Historical Review Board.	
<input type="checkbox"/>	1. Site plan (no larger than 24" x 36") showing the lot/tract, building locations, outdoor sales display or storage areas, trash collection areas, parking areas, driveways, loading/unloading areas, sidewalks, open-space and landscaped areas, lighting locations, sign locations, ground-mounted equipment areas, topography, drainage and floodplain areas, and any other pertinent design elements (if applicable).
<input type="checkbox"/>	2. Landscaping plan (no larger than 11" x 17") and listing of proposed plant type, number, and sizes at planting and maturity (if applicable).
<input type="checkbox"/>	3. Lighting plan (no larger than 11" x 17"), including lighting fixture specifications (if applicable).
<input type="checkbox"/>	4. Building elevations (no larger than 24" x 36") for all sides (if applicable).
<input type="checkbox"/>	5. Sample of building materials and colors (if applicable).
<input type="checkbox"/>	6. Photographs of site, adjoining properties, and similar building designs (if applicable).
<input type="checkbox"/>	7. Certificate of Appropriateness (COA) application and review fee.
Note: If full-size plans (larger than 11" x 17") are submitted, the Applicant must submit seven (7) copies. If reduced-size plans (no larger than 11" x 17") are available, then the Applicant may submit only one (1) full-size copy and one (1) reduced size copy.	

Applicant & Owner Certification	
<p><i>Please read carefully, initial, and sign below.</i> I (We) do hereby certify that the information provided herein is both complete and accurate to the best of my knowledge, and I (we) understand that any inaccuracies may be considered just cause for invalidation of this application and any action taken on this applications. I (we) further hereby certify that I (we) am (are) aware of the plans and supporting documentation submitted as part of the application and aware of the required design standards and review process set forth in Article 15 of the Zoning Regulations and Bardstown Historic Design Review Manual. I (we) further hereby certify that I (we) agree that the filing of this application constitutes an agreement with all owners and other parties having an interest in the subject property, their heirs, successors, and assigns, to comply with any and all imposed conditions and requirements. (____Initial)</p> <p>I further acknowledge that my compliance with the terms of the Certificate of Appropriateness is subject to periodic inspections and I grant to the City of Bardstown or <i>its</i> agents the right to enter upon the property to which the COA pertains at reasonable times to perform one or more inspections of the property to assure compliance. (____initial)</p> <p><input type="checkbox"/> Additional pages attached</p>	
Signatures of Applicant & Co-Applicant/Owner	Title: _____ Date: _____
Applications that contain any additions, changes in placement, or consideration of setbacks must be <i>approved and signed</i> by the Director of the Joint City-County Planning Commission of Nelson County.	
<i>Signature required below:</i>	

For Office Use Only			
Date Application Received:			
Filing Fee Paid:	<input type="checkbox"/> Check#	<input type="checkbox"/> Cash	Other (specify)
Administrative Review or HRB Meeting (Date):			
<i>Signature required below:</i>			
<i>(eff. 1/22/ 2015)</i>			