

**Application for Certificate of Appropriateness
City of Lima
Lima Design Review Board**

1. Person Submitting/
Name of Property _____ Date: _____

2. Address of
Property _____

3. Owner of Property _____
First Name Last Name

Street Address

City State Zip

Phone Numbers: _____
Home Business

4. Name of business(es) and owners(s) housed in property:

Name	Owner
Name	Owner
Name	Owner

5. Have you reviewed the Design Guidelines and the Board's Rules and Regulations?
 Yes No

6. Is the building on the National Register of Historic Places? Yes No Unsure

7. Scope of project to include: (please check appropriate areas)

- | | |
|--|--|
| <input type="checkbox"/> Building Demolition
<input type="checkbox"/> Site Development after demolition

<input type="checkbox"/> New Construction and/or Addition

<input type="checkbox"/> Awnings

<input type="checkbox"/> Signage

<input type="checkbox"/> Doors, Windows, Entrances

<input type="checkbox"/> Roofing

<input type="checkbox"/> Painting | <input type="checkbox"/> Façade Restoration / Alteration

<input type="checkbox"/> Side or Rear Treatments

<input type="checkbox"/> Site Development
<input type="checkbox"/> Landscaping
<input type="checkbox"/> Parking Lot Layout

<input type="checkbox"/> Lighting
<input type="checkbox"/> Facade
<input type="checkbox"/> Awning
<input type="checkbox"/> Ground |
|--|--|

8. Briefly explain the proposed work:

9. Please submit the following information:

- One historical (if available) and one modern photograph
- Ten copies of proposed elevation views, with description of materials and colors included on the elevation
- Ten copies of site plans (if applicable)

10. Estimated starting date of project: _____

11. Estimated completion date of project: _____

12. Are you aware of the various financial incentives that may be available for this project?
Yes No

If no, contact the Lima Department of Community Development for further information BEFORE starting work. 419 221-5146.

13. Do you have any questions or concerns?

I understand the criteria for this application, approval, and reviews by the Design Review Board and agree to be subject to the Downtown Lima Design Guidelines for the above described work in accordance with City Ordinance Section 1409, as amended.

Signed: _____ Date: _____
Applicant Signature

Property Owner (if different from applicant)

Note: Upon approval of the application a certificate of approval will be issued. Work can not start until the applicant receives this approval. No building permits will be issued without a certificate of approval.

*Please submit to the City of Lima Building Commissioner located at 50 Town Square
Lima, Ohio 45801.*

For Official Use Only:

Date Received by Board: _____

Application Number: _____

Approved as submitted, no modifications ----- _____ -----

Approved as noted, with modifications as agreed to ----- _____ -----

Denied as currently submitted----- _____ -----

Signed: _____ Date: _____
Chair, Design Review Board