

CITY OF GLEN ROSE Code Enforcement Office 254-897-9373 Fax 254-897-7989

## CERTIFICATE OF APPROPRIATENESS APPLICATION

 Completed package must be received at least three weeks prior to the next scheduled Board meeting in order to be placed on the agenda for review and vote. Attach additional description pages to give full details, if needed

Property Owner	Applicant/Tenant/Owner's Representative
Name GR Holdin	Applicant/Tenant/Owner's Representative Ricard  Name TER Holding Ricard
Address	Address
	114 E Barnard St.
Phone	Phone
Email	
Property Address 1144 Bay	Legal Description
Present Use Vacant	Built Circa
Proposed Use Retail S	
Architect or Contractor Name	
Address	Phone
Proposed Work/Design Description	inglights to Refert anchitefore of
☐ Scale Drawings with Dimensions ☐ Material Sample(s) Attached	Attached Photos Attached Current Historic  Rendering of Signage Attached
	rrect to the best of my knowledge, and that the said work will be done in conformance
	in compliance with the City of Glen Rose's Historic District Ordinances and Building
Codes. Lunderstand that falsifying Inform	ation may result in nullification of this request.
Owner's Signature	Applicant's Signature
☐ Denied ☐ Approved Condi	tions
X	X ×
Preservation Board Chair	Preservation Board Officer City Building Official
THIS IS NOT A BUILDING PERMI	T AUTHORIZING ANY CONSTRUCTION OR REMODELING. CONTACT THE CODE

ENFORCEMENT OFFICE PRIOR TO THE START OF ANY WORK. THIS COA BECOMES NULL AND VOID OF AUTHORIZED WORK IS NOT COMMENCED WITHIN 180 DAYS.