

The City of Norman Historic District Commission
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS (COA)

Staff Only Use:

HD Case # _____

Date _____

Received by: _____

Note: Any relevant building permits must be applied for and paid for separately in the Planning and Community Development Office 405-366-5311.

Address of Proposed Work:

643 Okmulgee St Norman 73071

Applicant's Contact Information:

Applicant's Name: Ryan B Stover + Brittany L. Stover

Applicant's Phone Number(s): (405) 482-0038 (405) 615-1608

Applicant's E-mail address: ryan_stover@yahoo.com

Applicant's Address: 625 Tulsa St. Norman, OK 73071

Applicant's relationship to owner: Contractor Engineer Architect owner

Owner's Contact Information: (if different than applicant)

Owner's Name: Same as above

Owner's Phone Number(s): Same as above

Owner's E-mail: Same as above

Project(s) proposed: (List each item of work proposed. Work not listed here cannot be reviewed.)

- 1) Add a new 10 ft wide driveway (concrete) off Oklahoma Ave. to existing garage
- 2) Build a 538 sq. ft. addition on the northwest side of existing house. Siding/windows to match
- 3) Build a new backyard entry w/ patio on the north side of existing home + remove current entry
- 4) Trim overhanging branches to structure from backyard large tree

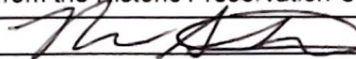
- 5) Re-paint house same color white
- 6) Remove storm windows

Supporting documents such as project descriptions, drawings and pictures are required see checklist page for requirements.

Authorization:

I hereby certify that all statements contained within this application, attached documents and transmitted exhibits are true to the best of my knowledge and belief. In the event this proposal is approved and begun, I agree to complete the changes in accordance with the approved plans and to follow all City of Norman regulations for such construction. I authorize the City of Norman to enter the property for the purpose of observing and photographing the project for the presentations and to ensure consistency between the approved proposal and the completed project. I understand that no changes to approved plans are permitted without prior approval from the Historic Preservation Commission or Historic Preservation Officer

Property Owner's Signature:



Date: 11/5/21

(If applicable): I authorize my representative to speak in matters regarding this application. Any agreement made by my representative regarding this proposal will be binding upon me.

Authorized Representative's Printed Name:

Authorized Representative's Signature:

Date: