

## ARCHITECTURAL REVIEW BOARD CERTIFICATE OF APPROPRIATNESS

COA#	
Zoning #	
Assoc. Permit #	

COMMUNITY DEVELOPMENT DEPARTMENT 18 Court Street, Lower Level Warrenton, VA 20186 Phone: 540-347-2405 Email: planning@warrentonva.gov

Facsimile: 540-349-2414

The Architectural Review Board (ARB) meets every 4<sup>th</sup> **Thursday at 7:00pm** in Town Hall (18 Court Street). Applications requiring ARB are due by the 1<sup>st</sup> day of each month (or the first business day immediately following) prior to the meeting. Each applicant or a representative, who has the authority to commit the applicant to changes as recommended or required by the ARB are required to attend this meeting or the application will be deferred. Please read the <u>Warrenton Historic District Guidelines</u> for additional information Historic District requirements.

additional information Historic District requirement	ts.
<ul><li>✓ Photographs of the area of work.</li><li>✓ Plans, drawings, product information sheet</li></ul>	a complete, signed application (check if submitted):  ts, and/or samples (Two hard/one digital copy).  uired; this application also serves as a zoning permit).
Project Owner	
	renton, VA 20186 GPIN:
Name: William M. Reidy	Email: billreidy@outlook.com
Address: 101 Winchester St., Warrenton, VA 2	
Applicant (If different then above)	
Name:	Email:
Address:	Phone:
Applicant's Representative (If different then above. changes that may be suggested or required by the A	Must have authority to commit the applicant to make RB)
Name:	Email:
Address:	Phone:
Complete description of each modification or impro	ovement
Please see attached description	
Is there an application relevant to this property pend.  Yes No If so, specify:  Signature of Property Owner  William M. Reidy	ding or contemplated before anther Town Board?  Signature of Applicant/Agent
Name (Print or Type)	Name (Print or Type)