



## TOWN OF WARRENTON

PO BOX 341  
WARRENTON, VIRGINIA 20188  
<http://www.warrentonva.gov>  
[planning@warrentonva.gov](mailto:planning@warrentonva.gov)  
(540) 347-2405

### ARCHITECTURAL REVIEW BOARD CERTIFICATE OF APPROPRIATNESS

COA # \_\_\_\_\_

Assoc. Permit # \_\_\_\_\_

The Architectural Review Board (ARB) meets every **4<sup>th</sup> Thursday at 7:00pm** in Town Hall (21 Main 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 [Warrenton Historic District Guidelines](#) for additional information Historic District requirements.

The following materials are required in addition to a complete, signed application (check if submitted):

- ☒ Photographs of the area of work.
- ☐ Plans, drawings, product information sheets, and/or samples (Two hard/one digital copy).
- ☐ Accompanying permit applications (if required; this application also serves as a zoning permit).

#### Project Owner

Address/Location: 16 Courthouse Square GPIN: \_\_\_\_\_

Name: Fauquier County Government Email: John.Swain@FauquierCounty.gov

Address: 98 Manor Court Phone: 540-422-8484

#### Applicant (If different then above)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Applicant's Representative (If different then above. Must have authority to commit the applicant to make changes that may be suggested or required by the ARB)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Complete description of each modification or improvement

Replace the existing rotten soffit and fascia boards with PVC lumber. It is known to be more durable, resistant to rot and insects and requires far less maintainance. Please note that this is 30+/- feet above finish grade on the low side of the building.

Is there an application relevant to this property pending or contemplated before another Town Board?

Yes ☐ No ☐ If so, specify: \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Name (Print or Type)

\_\_\_\_\_  
Name (Print or Type)



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COA # \_\_\_\_\_

OFFICIAL USE ONLY	
<b>Approvals Required (Circle Y or N)</b>	
Y / N	Administrative Approval
Y / N	Architectural Review Board Approval
Y / N	Other Permits Required, If yes list: _____
<b>Notes</b>	
Zoning District: _____ Use: _____	
Notes/Conditions of Approval:	
<b>Approvals</b>	
Certificate of Appropriateness: _____ Date: _____	
Zoning Permit: _____ Date: _____	
<b>Fees</b>	
<u>Paid Stamp</u>	
<div style="text-align: right; padding-right: 50px;"> Certificate of Appropriateness: _____   Zoning: _____ </div>	