



TOWN OF WARRENTON

ARCHITECTURAL REVIEW BOARD CERTIFICATE OF APPROPRIATNESS

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

COA # _____

Assoc. Permit # _____

The Architectural Review Board (ARB) meets every **4th Thursday at 7:00pm** in Town Hall (21 Main Street). Applications requiring ARB are due by the **1st 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: 5 N 5th Street GPIN: 6984-43-8247

Name: IOOF, Oddfellows, Lodge 27 Email: dstone@assurancenow.com

Address: 77 E Lee Street Warrenton VA 20186 Phone: 540-270-5481

Applicant (If different then above)

Name: Will Thomas Email: _____

Address: 8394 Elway Lane, Warrenton VA 20186 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: Adrienne Gwenn Email: agwenn@ttrsir.com

Address: _____ Phone: 540-270-6536

Complete description of each modification or improvement

Applicant wishes to add an awning installed by Montgomery Awning and Shade over the front door. Applicant wishes to replace dilapidated exterior front door with a multi-pane style steel door.

Applicant will have a 10" x 10" plaque installed in the masonry w/ 2 #3 masonry screws

Is there an application relevant to this property pending or contemplated before another Town Board?
Yes ☐ No ☒ If so, specify: _____


Signature of Property Owner

David Stone for IOOF

Name (Print or Type)


Signature of Applicant/Agent

Adrienne Gwenn

Name (Print or Type)