

# Design Review and Preservation Board Application



Please fill out this application so we will know who you are, what you are applying to do, and how to contact you. With this basic information we will evaluate your project as it relates to City regulations as quickly as possible. Thank you for your cooperation.

## GENERAL INFORMATION ABOUT THE PEOPLE INVOLVED

Date \_\_\_\_\_

**Applicant:** \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Phone# \_\_\_\_\_ Phone# \_\_\_\_\_ Fax# \_\_\_\_\_

**Agent:** \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Phone# \_\_\_\_\_ Phone# \_\_\_\_\_ Fax# \_\_\_\_\_

## WHAT ARE YOU APPLYING TO DO? (CHECK ONE OR MORE) APPLICATION CHECKLIST

- Signage Review
- New Construction Review
- Exterior Renovation Review
- Historic Preservation
- Other \_\_\_\_\_
- Drawing of Proposed Changes
  - Dimensions
  - Type of illumination
  - Colors
  - Description of Materials
- Photo(s) of existing site
- Applicant Signature
- Owner's Signature
- \$25.00 fee- for signage only
- Electronic copies of renderings sent to: michiel.wackers@cityofmiddletown.com

## FACTS ABOUT LAND PROPOSED FOR USE

Landowner: \_\_\_\_\_ Location: \_\_\_\_\_

Zone \_\_\_\_\_ Lot Area \_\_\_\_\_ Tax Assessor's Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Is this project within 500' of a Municipal Boundary? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this project located in a FEMA 100 or 500 year flood plain? Yes \_\_\_\_\_ No \_\_\_\_\_

Utilities Available: City Water (  ); Private Well (  ); City Sewer (  ); Private Septic (  )

## REQUIRED SIGNATURES

\_\_\_\_\_  
SIGNATURE OF APPLICANT/AGENT\*

\_\_\_\_\_  
SIGNATURE OF OWNER\*

\*Both signatures required. I certify that the above information and plans submitted are true and correct, and that, if required, an application for an Inland/Wetlands permit has been filed before or on the same day as the filing of this application with the P&Z Commission.

## OFFICE USE

\_\_\_\_\_  
DATE OF REVIEW/APPROVAL

\_\_\_\_\_  
DESIGN REVIEW BOARD STAFF\*\*

\_\_\_\_\_  
DATE OF ZONING APPROVAL

\_\_\_\_\_  
ZONING ENFORCEMENT OFFICER SIGNATURE

\*\*See attached Decision Report for conditions of the approval. Not valid without Decision Report.