

West Chester
Historical and Architectural Review Board

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
BOROUGH OF WEST CHESTER
HISTORICAL AND ARCHITECTURAL REVIEW BOARD

THE HISTORICAL AND ARCHITECTURAL REVIEW BOARD MEETS ONCE A MONTH
ON THE FIRST THURSDAY OF EVERY MONTH AT 7:00 PM
WEST CHESTER BOROUGH HALL, ROOM 240
401 EAST GAY STREET, WEST CHESTER, PA 19380
(ALL MEETINGS ARE OPEN TO THE PUBLIC.)

Please read this information carefully before completing the application.

- 1) The Historical and Architectural Review Board (HARB) can review your application without your presence or the presence of your authorized representative; however, unanswered questions concerning your application may cause the tabling of your application until the next meeting that you can attend.
- 2) If you have any questions, please feel free to call the Borough at (610) 696-1773 before you file this application; they will put you in touch with a member of the Board to guide you through the application process.
- 3) ***Your application is due no later than 5 PM, two weeks prior to the HARB Meeting.*** This will give the HARB two weeks to review your application and prepare a preliminary report for the entire Review Board. A member of this Board may also call you to clarify questions regarding your application. Don't forget to fill out only the relevant Sections of the Application and include any current photographs, elevations, relevant drawings, specific lettering fonts (for signage), and old documents or photographs that you may have researched.

Please see the attached schedule for HARB meeting dates and application deadline dates.

- 4) If your application involves the repointing of brick masonry, please contact a HARB member for a complimentary copy of an instruction article that describes the proper mortar mix required for use on historic structures.

(Office use only.)

Date application received: _____

Application number: _____

PROPERTY ADDRESS: _____

NOTE: All projects must have the appropriate Section(s) of the Application filled out and attached to this form when it is returned and filed with the Building and Housing Office. You need not attach any Sections that do not relate to your project. Please request as many of the Section forms as you may need. Your application number will be assigned when you return these forms. Remember, your completed application, including any pictures and plans, must be filed by the deadline date on the appended schedule in order to be reviewed at the next HARB meeting.

1) ***This application is for:*** (check the appropriate boxes)

- Section #1: Sign
- Section #2: Canopy or Awning
- Section #3: Repair, replacement, or alteration from original (please supply photos or elevations of original) *
- Section #4: Addition (supply architectural elevations and site drawings, as well as photos of the existing structure) *
- Section #5: New Construction (supply architectural elevations and site drawings, as well as photos of buildings next to and around the site) *
- Section #6: Demolition *

Note: Fill out and attach only those Sections appropriate to your project.

2) ***Please indicate which items you are submitting with your application form. Do not submit originals, since these will be kept by the HARB for its official archives.***

- Color or B/W sketches
- Plot or site plans
- Old or historic photographs
- Architectural elevations
- Photographs of the current existing site showing where changes are to be made, location of buildings, and streetscape.

All sketches, elevations, and plans must be signed by the preparer(s).

The owner of this property and the applicant agree to conform to all applicable findings of the Borough of West Chester Historical and Architectural Review Board.

Applicant's name (print): _____

Applicant's Signature: _____ Date: _____

Owner's name (print): _____

Owner's Signature: _____ Date: _____

***Note:** Check with the Building and Housing Office of the Borough of West Chester to see if you need a building permit as well as a Certificate of Appropriateness *before* you begin your project.

Date application received: _____

Application number: _____

SECTION #1 / SIGNS

(Attach a separate Section #1 for *each* of the signs that you want to install.)

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address, city, state, & zip): _____

Applicant's phone number (Day): _____

(Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____

(Evening): _____

Instructions: Provide color or B/W sketches of each sign and its message, and also show its proposed placement and proportion to the building façade. Also attach photos of the streetscape and adjacent buildings.

- 1) Are you replacing an existing sign? _____
- 2) How many signs do you wish to install? _____
- 3) On how many facades? _____ Front Side Back
- 4) Hanging sign Building-mounted sign Other _____
- 5) Give a thorough description of the sign: _____
- 6) Is there new illumination? _____ Fixture type? _____
How will it be mounted? _____
- 7) Sign Dimensions: Height: _____ x Width: _____ x Depth: _____
- 8) If a hanging sign, what is the height *from the sidewalk to the bottom of the sign*? _____
(Current Borough code requires 8'-0" minimum to bottom of sign)
- 9) How will this sign be mounted? _____
(Please note: any attachment to a masonry façade must be done through the mortar joints, NOT into the masonry.)
- 10) If a hanging sign, describe the hanging bracket: _____
- 11) If a hanging sign, is this an existing bracket? _____
- 12) Colors: _____
- 13) Message: _____
- 14) Lettering style: please note that the historic preference is for any "serif" type: _____

Please be sure to attach sample of sign wording in chosen lettering style.

Date application received: _____

Application number: _____

SECTION #2 / CANOPY OR AWNING

(Attach a separate Section #2 for *each* of the canopies or awnings that you want to install.

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address city, state, & zip): _____

Applicant's phone number (Day): _____

(Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____

(Evening): _____

Instructions: Provide color or B/W sketches of each canopy or awning, and also show its placement and proportion to the building facade where it is going to be placed. Also attach photos of the adjacent streetscape and adjacent buildings.

- 1) Are you replacing an existing canopy or awning? _____
- 2) How many canopies or awnings do you wish to install? _____
- 3) On how many facades? _____ Front Side Back
- 4) Material: give a thorough description of the type and style to be used. _____

- 5) How will it be mounted? _____
(Please be note that any attachment to a masonry façade must be done through the mortar joints and NOT the face of masonry.)
- 6) Are you reusing an existing canopy or awning skeleton(s)? _____
- 7) Is there new canopy or awning illumination? Fixture type? _____
How will it be mounted? _____
- 8) Canopy or Awning Dimensions: Height: _____ x Width: _____ x Depth: _____
- 9) What is the height *from the sidewalk to the bottom of the canopy or awning*? _____
(Current Borough code requires a minimum height of 8'-0" to bottom of awning or canopy.)
- 10) Colors: _____
- 11) Message: _____
- 12) Lettering style: please note that the historic preference is for any "serif" type. _____

Please be sure to attach sample of the canopy or awning wording in chosen lettering style.

Date application received: _____

Application number: _____

SECTION #3 / REPAIR, REPLACEMENT, OR ALTERATION

(Attach a separate Section #3 for each of the repairs, replacements, or alterations you want to make.)

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address city, state, & zip): _____

Applicant's phone number (Day): _____ (Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____ (Evening): _____

Instructions: Provide clear photographs showing the location of each proposed improvement, including photos of streetscape and the adjacent buildings. Provide architectural elevations and/or photographs clearly showing the location of the proposed work. Provide material specifications and manufacturer's pamphlets on the replacement materials proposed.

- 1) Which element(s) do you wish to change? Doors Windows Roofing Gutters
 Walls Steps Sidewalk Fence Trim Railing Porch or balcony
 Other (Specify) _____
- 2) On how many facades? _____ Front Side Back
- 3) What was the old material? _____
- 4) What is the proposed new material? _____
- 5) How will it be installed? _____
- 6) Are you reusing any historic materials? _____
- 7) If so, what and how? _____
- 8) What were the old dimensions? Height: _____ x Width: _____ x Depth: _____
- 9) What are the new dimensions? Height: _____ x Width: _____ x Depth: _____
- 10) What were the old colors? _____
- 11) What do you propose for the new colors? _____
- 12) Why do you want to make these changes? _____

Date application received: _____

Application number: _____

SECTION #4 / ADDITIONS

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address city, state, & zip): _____

Applicant's phone number (Day): _____

(Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____

(Evening): _____

Instructions: Include one Application per addition. Provide clear photographs showing the location of each proposed addition. Also attach photographs of the streetscape and adjacent buildings. Provide architectural elevations, material specifications, and manufacturer's pamphlets on the materials proposed.

1) Addition location: Front facade Left of front Right of front Back facade Other(Specify)

2) Footprint dimensions: _____

3) Number of Stories: _____

4) When was your building built? _____ Architectural Style _____

Architect/Builder (if known) _____

5) Window style and materials: _____

How do they match/contrast with the rest of the building? _____

6) Roof style and material: _____

How do they match/contrast with the rest of the building? _____

7) Wall and siding materials: _____

How do they match/contrast with the rest of the building? _____

8) Are you using any historic materials? _____

If so, what and how? _____

9) Why are you building this addition? _____

Date application received: _____

Application number: _____

SECTION #5 / NEW CONSTRUCTION

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address city, state, & zip): _____

Applicant's phone number (Day): _____

(Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____

(Evening): _____

Instructions: Provide clear photographs showing the location of your proposed construction. Also attach photographs of the streetscape and adjacent buildings. Provide architectural elevations, material specifications, and manufacturer's pamphlets on the materials proposed.

1) Footprint dimension: _____

2) Number of stories? _____

How does it match/contrast with the rest of the streetscape? _____

3) Architectural Style _____

How does it match/contrast with the rest of the streetscape? _____

4) Window and Door style and materials: _____

How do they match/contrast with the rest of the streetscape? _____

5) Roof style and material? _____

How do they match/contrast with the rest of the streetscape? _____

6) Wall and siding materials: _____

How do they match/contrast with the rest of the streetscape? _____

7) Are you using any historic materials? _____

If so, what and how? _____

Date application received: _____

Application number: _____

SECTION #6 / DEMOLITION

Location of project (address): _____

Name of business (if applicable): _____

Applicant's name (please print): _____

Applicant's address (address city, state, & zip): _____

Applicant's phone number (Day): _____ (Evening): _____

Owner's name (if different from applicant's): _____

Owner's address (address, city, state, & zip): _____

Owner's phone number (Day): _____ (Evening): _____

Instructions: Provide clear photographs of the building being proposed for demolition and of the adjacent buildings and streetscape. Attach any historical photographs, drawings, or elevations that you could find about this building. Attach architectural elevations of the proposed demolition, clearly showing the full extent of the project, including plot and site plans of the property. Attach any plans, drawing and/or elevations that you may have for the future use of this site.

- 1) Check which you would like to demolish
- Entire building and all attached appurtenances
 - Part(s) of the building (Identify): _____

2) When was this building built? _____ Architectural Style _____

3) Historic associations? _____
Architect/Builder(if known) _____

4) Why do you wish to tear down this building? _____

5) What do you intend to place on this site after demolition? _____

6) When? _____