

Design Review Board Application



Cost of Project: Under \$10,000 Over \$10,000

This Application For (check all that apply):

- Signage Additions
 New Construction Exterior Alteration

Business Name: _____

Location Address: _____

Parcel ID: _____ Zoning: _____ Estimated Cost: _____

Property Owner: _____ Phone Number: _____

Representative Name: _____ Phone Number: _____

Representative Email: _____

Project Description: _____

Required for All Submittals: Photographs, Site and Elevation plan

I (We), the undersigned, attest that the above information is true and correct to the best of my (our) knowledge. Further, I (We) owner of said property authorize the above listed representative to act as my agent in this application.

Owner Signature: _____ **Date:** _____

Representative Signature: _____ **Date:** _____

The Design Review Board will have 30 days within receipt of an application to hold a meeting on the application, if applicable.

For Office Use Only

Permit No.: _____ Date Received: _____

Approved Denied Approved with conditions: _____

Approved By: _____ Approved On: _____ DRB Held On: _____