

APPLICATION for a CERTIFICATE OF APPROPRIATENESS
 For Real Estate Tax Credit & Permit Fees Cancellation
Warren Voluntary Historic Preservation Program (WVHPP)

1- **Property Address** _____ **Plat** _____ **Lot** _____

2- **Owner's Name** _____
Address _____
Telephone # **Home** _____ **Work** _____

3- **Contractor's Name (if applicable)** _____
Address _____
Telephone # **Home** _____ **Work** _____

4- **Designer's Name (if applicable)** _____
Address _____
Telephone # **Home** _____ **Work** _____

5- **Work to be Performed Category:** (please check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> roof repairs | <input type="checkbox"/> trim and ornament repairs | <input type="checkbox"/> porch repairs |
| <input type="checkbox"/> foundation repairs | <input type="checkbox"/> exterior paint/stain/finishes | <input type="checkbox"/> structural repairs |
| <input type="checkbox"/> exterior wall repairs | <input type="checkbox"/> door and window repairs | <input type="checkbox"/> other |

6- **Work to be Performed:** (if you need more space, attach additional page(s))

| | Estimated Cost | Final Cost |
|---|----------------|------------|
| 1- | | |
| 2- | | |
| 3- | | |
| 4- | | |
| 5- | | |
| Totals from additional pages(s) (if required) | _____ | _____ |
| TOTAL PROJECT COSTS | _____ | _____ |

7- **Required Attachments** (BEFORE work is performed submit 5 copies of each)

- Color photographs of structure(s) BEFORE work starts (note date taken)**
 - full view of the front of the building
 - views of all other sides on which work will be done
 - close-ups of work to be performed

- Drawings (to scale)** **Miscellaneous** **Other** (describe)
 - site plan
 - exterior elevations
 - details
 - catalogue cuts
 - specifications
 - renderings
 - _____

8- Required Documents* (AFTER work is completed)

- () **Color photographs of structure(s) AFTER work is completed**
 - full view of the front of the building
 - views of all other sides on which work was completed
 - close-up of work completed

- () **Proof of reported costs**
 - copies of cancelled checks, and/or
 - copies of itemized receipts for payments (marked paid)
 - copies of signed contracts, bills, and any other documentation of costs (if cancelled checks are made out to an individual rather than a company)

**Tax credit will not be processed until the above information is presented for review by the Committee*

9- Does this project require a Building Permit from the Building Official to proceed?

- () Yes
- () No

TIME & MINIMUM PROJECT LIMITS:

- 1- **Application:** Must be received not later than ten (10) days prior to the next regularly scheduled monthly meeting of the WVHPP Committee
- 2- **Application Expiration:** All approved Applications shall expire automatically six (6) months after date of approval unless a building permit has been issued and work begun unless an extension has been granted by the WVHPP Committee prior to its expiration. Approved project expense must be at least \$2,000.
- 3- **Project Completion:** All documents as noted in Paragraph 8 above must be submitted to the Building Official's office not later than 60 days after the completion of all project tasks. Failure to submit these documents within the time required will automatically terminate the granting of the real estate tax credit as approved.

STATEMENT OF RIGHT TO APPEAL:

Any person or person jointly or severally aggrieved by a decision of the Committee shall have the right to appeal concerning such decision to the WVHPP Board of Appeals within twenty (20) days after the filing of notice in the Building Official's records of the Town of Warren. Procedures used in filing such an appeal shall be identical to the procedures used in filing an appeal of the Building Official.

FILING & AVAILABILITY OF RECORDS:

This document and all other documents associated with this Application and Findings & Motions of the WVHPP Committee shall be attached to the application for a building permit and kept in the records of the Town of Warren's Building Official, Warren Town Hall, 514 Main Street, Warren, RI 02885 and are available for public inspection and reproduction.

ACKNOWLEDGMENT BY OWNER:

All work will be completed as shown on the approved plans and specifications as filed with this Committee. Stamped plans together with this certificate are required by the Building Official before any construction permits are issued or construction fees cancelled. Changes to the approved plans and any additional work not reviewed must be approved by the Committee. By signing below, the applicant certifies that he/she understands and agrees to comply with all amendments of conditions imposed by this Committee.

Signature of Owner(s) _____ Date _____

_____ Date _____

FOR INTERNAL USE ONLY

10- Property Structure Description:

- Contributing Non-contributing _____
- Architectural style _____
- Statement of significance when appropriate _____

11- Decision by WVHPP Committee:

- Approved as submitted (\$ _____) Pre-application advisory opinion
- Approval with conditions Conceptual project findings
- Application DENIED Other

The WARREN VOLUNTARY HISTORIC PRESERVATION PROGRAM COMMITTEE

DENIES the application for a Certificate of Appropriateness for the property noted above for the reasons/conditions _____

APPROVES the application for a Certificate of Appropriateness for the property noted above. This is consistent with the Town of Warren's Standards & Guidelines particularly Items # _____ Specific work items approved as part of this application include: _____

Date of Hearing _____ Date of Action _____

Chairman/Vice-Chairman (signature) _____ Date _____

12- Building Official Action

Date Building Permit Issued _____ Signature _____
Construction Permit Fees Cancelled \$ _____

The final inspection for this project was performed on _____ as to the maintenance or rehabilitation of said historic property which conforms to the guidelines set forth by the terms of Chapter Four, Article VIII of the code of the Town of Warren.

13- Committee Action (at project completion)

Date Project Expense Receipts Received \$ _____
Total Project Expense Approved \$ _____
Committee Approval:

Chairman/Vice-Chairman (signature) _____ Date _____

14- Tax Assessor Action:

The approved project and project expenses conform to the Warren Voluntary Historic Preservation Program guideline. An annual tax credit of \$ _____ will apply for _____ years totaling \$ _____ beginning with the tax year beginning _____

Tax Assessor (signature) _____ Date _____