



APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Name of Applicant: _____

Mailing Address: _____

Phone Number: _____ **Email Address:** _____

Name of Owner (if different than Applicant): _____

Mailing Address: _____

Phone Number: _____

Address of Property Where Structure/Site Located: _____

District Located or Landmark: Mercer Street Old Fitzhugh Road Hays Street

Individual Landmark (Not in an Historic District)

Zoning Classification of Property: _____

Proposed Use of Property (reference Land Use Chart in Zoning Ordinance):

Description of Proposed Work: _____

Description of How Proposed Work will be in Character with Architectural and/or Historical Aspect of Structure/Site and the Applicable Zoning Requirements:

Estimated Cost of Proposed Work: _____

Intended Starting Date of Proposed Work: _____

Intended Completion Date of Proposed Work: _____

ATTACH THE FOLLOWING DOCUMENTS (in a form acceptable to the City):

- Current photograph of the property and adjacent properties (view from street/right-of-way)
- Concept Site Plan: A drawing of the overall conceptual layout of a proposed development, superimposed upon a topographic map or aerial photo which generally shows the anticipated plan of development
- Elevation drawings/sketches of the proposed changes to the structure/site
- Samples of materials to be used
- Color chips of the colors which will be used on the structure (if applicable)
- Sign Permit Application (if applicable)
- Building Permit Application (if applicable)
- Application for alternative exterior design standards and approach (if applicable)
- Supplemental Design Information (as applicable)

Signature of Applicant

Date

Signature of Property Owner Authorizing the Proposed Work

Date

******TO BE FILLED OUT BY CITY STAFF******

Date Received: _____ Received By: _____

Project Eligible for Expedited Process: Yes No

Action Taken by Historic Preservation Officer: Approved Denied

Approved with the following Modifications: _____

Signature of Historic Preservation Officer

Date

Date Considered by Historic Preservation Commission (if required): _____

Approved Denied

Approved with the following Modifications: _____

Historic Preservation Commission Decision Appealed by Applicant: Yes No

Date Appeal Considered by Planning & Zoning Commission (if required): _____

Approved Denied

Approved with the following Modifications: _____

Planning & Zoning Commission Decision Appealed by Applicant: Yes No

Date Appeal Considered by City Council (if required): _____

Approved Denied

Approved with the following Modifications: _____

Submit this application to City Hall at 511 Mercer St./P.O. Box 384, Dripping Springs, TX 78620. Call City Hall at (512)858-4725 if you have questions regarding this application.

Received on/by:

Date, initials



BILLING CONTACT FORM

Project Name: _____

Project Address: _____

Project Applicant Name: _____

Billing Contact Information

Name: _____

Mailing Address: _____

Email: _____ Phone Number: _____

Type of Project/Application (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Alternative Standard | <input type="checkbox"/> Special Exception |
| <input type="checkbox"/> Certificate of Appropriateness | <input type="checkbox"/> Street Closure Permit |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Waiver |
| <input type="checkbox"/> Exterior Design | <input type="checkbox"/> Wastewater Service |
| <input type="checkbox"/> Landscape Plan | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Lighting Plan | <input type="checkbox"/> Zoning |
| <input type="checkbox"/> Site Development Permit | <input type="checkbox"/> Other _____ |

*Applicants are required to pay all associated costs associated with a project's application for a permit, plan, certificate, special exception, waiver, variance, alternative standard, or agreement, regardless of City approval. Associated costs may include, but are not limited to, public notices and outside professional services provided to the City by engineers, attorneys, surveyors, inspectors, landscape consultants, lighting consultants, architects, historic preservation consultants, and others, as required. Associated costs will be billed at cost plus 20% to cover the City's additional administrative costs. **Please see the online Master Fee Schedule for more details.** By signing below, I am acknowledging that the above listed party is financially accountable for the payment and responsibility of these fees.*

Signature of Applicant

Date