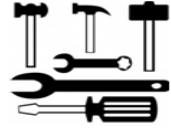




Town of Exeter Historic District Commission

10 FRONT STREET • EXETER, NH • 03833-3792 • (603) 778-0591 • FAX (603) 772-4709
www.exeternh.gov

CERTIFICATE OF APPROPRIATENESS For erection and display of NEW CONSTRUCTION



Official Use Only

Application No. _____ Fee Paid _____ Date Paid _____
(mm/dd/yyyy)

Application is hereby made for the issuance of a Certificate of Appropriateness under Zoning Ordinance Article 8.0 Historic District Regulations.

To be completed by Applicant	To be completed by Town Staff		
	Yes	Yes	No
Completed New Construction Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site Plan: to scale, locate footprint of proposed building, include key dimensions and materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Floor Plans: to scale, indicate windows, doors, general interior wall layout, floor elevation changes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proposed Exterior Elevations: to scale, indicate window style, door style, trim proportions, exterior lighting, top of floor locations with heights, dimension overall height of building, indicate height of neighboring buildings at eaves and peak diagrammatically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Architectural Details: including but not limited to widow/door/cornerboard trim, eave, railings, cupolas, brackets, shutters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Description of Materials (specification sheets and/or samples): including but not limited to windows, doors, siding, trim, masonry, exterior lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Photographs: existing site, existing structure to be modified if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application Fee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Project Property Address: _____

The following information can be obtained from the Assessor's Office or Planning Department

Tax Map: _____ **Lot No.:** _____ **Unit:** _____

Please check the category which is appropriate to this application

- New Construction
- New Construction – Addition to an Existing Structure

If known, list the architect, designer and/or contractor who are or will be involved with the design and execution of the work proposed in the application: _____



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The described work is scheduled to begin on _____ and to be completed by _____
(mm/dd/yyyy) (mm/dd/yyyy)

Other comments: _____

See Exeter Zoning Ordinance Section 8.0

Each application for a certificate of appropriateness shall be submitted on forms provided by the Historic District Commission (HDC). The application shall be presented to the Building Department of the town of Exeter, who shall record the date and receipt of the complete application. The Building Department will forward all applications to the HDC Chairperson.

Applicant Name	Property Owner (if different than applicant)
Applicant's Mailing Address	Property Owner's Mailing Address
City, State, Zip	City, State, Zip
Applicant's Phone Number	Property Owner's Phone Number
Applicant's Email	Property Owner's Email

Signature: _____ **Date:** _____
(Applicant, if different from Property Owner) (mm/dd/yyyy)

I attest that I represent the owner(s) of the above named property to be modified, and I authorize the applicant to represent me/us before the Exeter Historic District Commission in all matters concerning this application.

Signature: _____ **Date:** _____
(Property Owner) (mm/dd/yyyy)

The above named owner and applicant recognize that the property is situated in the Historic District of Exeter, New Hampshire. We certify that the information contained in the application is true to the best of our knowledge and request that the Exeter Historic District Commission consider the following proposal for said property.

END OF APPLICATION



Town of Exeter Historic District Commission

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Certificate of Appropriateness

Official Use Only

Application No. _____

Date Application received by the Building Department Office _____ (mm/dd/yyyy)

Date Application accepted by Historic District Commission _____ (mm/dd/yyyy)

Date Public Hearing held by Historic District Commission _____ (mm/dd/yyyy)

Disposition of Application:

- Disapproved
- Approved as submitted
- Approved with conditions listed below

Authorized Signature: _____

Date of Authorization: _____

Conditions of Approval:
