



ENFIELD HISTORIC DISTRICT COMMISSION

APPLICATION FORM

Initial Review date: _____
required

_____ Normal Repair & Maintenance; no further action

DETERMINATION: Review & Report to Commission / **HDCR** # _____

Certificate of Appropriateness / **HDC** # _____

Hearing Date: _____ Advertisement Date: _____ File close date: _____

Inspections / dates & comments:

Additional submittal materials required:

Above to be filled out by Planning Department staff

Below to be filled out by applicant

With the submittal of this application, the applicant and owner acknowledge the right of Town staff to periodically enter upon the subject property at reasonable times for the purpose of determining and verifying existing conditions and to determine compliance with the terms of any subsequent approval and conditions of approval.

Property owner: _____ Phone: _____ e-mail: _____

Owner's Address: _____

Project Address, if different: _____

Map _____ / Lot _____ Sequence # _____

Check those categories below that apply

USE: Residential _____ Combined Residential/Commercial _____

Commercial _____ Private non-profit _____

Single Family _____ Multi-family _____ Apartment/Condo _____ Planned Residential Development _____

Description of the proposed activity:

Submittal Materials – check off when submitted (as required, below, or additionally required – see above, staff review):

Site Plan (required) _____ 0 Elevations (required) _____ 0 Contractor(s) list (required) _____ 0

Project materials list (required) _____ 0 Other, from above _____ 0

Other, from above _____ 0 Other, from above _____ 0

Estimated cost of project: \$ _____ Proposed project start date: _____

Applicant or Property Owner Signature _____

Date: _____

Revised January 2010

