

VILLAGE OF BROCKPORT Historic Preservation Board

127 Main St Brockport, NY 14420 Tel: (585) 637-5300 Fax: (585) 637-1045

Web Site: www.brockportny.org

Certificate of Appropriateness Application

PRINT OR TYPE APPLICATION

PROPERTY / PROJECT INFORMATION	ON:
Property Address:	
Tax Map ID:	Year of Original Construction:
DESCRIPTION OF PROPOSED CHANG	GES:
Attach architectural drawings/photos, if possible—additions must be consistent with the existing character of the Building Inspector/Code Enforcement	nges and additions, paint colors, typeface styles (for signs), and materials to be used. -insert photos electronically as additional pages to this application. All changes and acter of the structure. Samples of appropriate colors and typeface styles are on file at ent Officer. All changes must conform to the United States Secretary of the Interior's file in the office of the BI/CEO and is online at http://nps.gov/hps/tps/standguide)

PURPOSE FOR DESIRED CHANGES & ADDITIONAL SUPPO	ORTING INFORMATION:
Certification of Stateme	nts:
NOTE The Historic Preservation Board expects to review your pronecessary. You may meet with the Board at our mutual convenience do so. We thank you for your participation in Brockport's historic participation.	e, if you wish, and the HPB may invite you to preservation program.
The applicant(s) hereby affirm that the above information is accurate and comple is/are the title owner(s) of the property or has/have been authorized by the title of	
Applicant Signature:	
Applicant Name Printed/Typed:	
Mailing Address:	
City / State / Zip:	
Phone: Fax:	
E-Mail:	
FOR OFFICE USE ONLY	
Commentary/Justification from HPB:	1
	Date Received:
	Date Reviewed:
	Confirmation sent:
Decision Made:	Copies filed by:
Approved Denied More info needed	