

| FOR STAFF USE ONLY | |
|--------------------------|-------------|
| Project # (major only): | COA #: |
| COA Classification Type: | Minor Major |

CERTIFICATE OF APPROPRIATENESS APPLICATION

Part 1. Application Notes

A Certificate of Appropriateness is required for all applications for permits involving any exterior alteration, restoration, reconstruction, demolition, new construction or moving of a locally designated historic landmark or a property within a local Historic District.

Minor exterior work, such as exterior maintenance and repair, change of paint color, replacement of non-original material, and minor changes that do not materially change the historic characteristics of the property may be reviewed by the Chief Planning Official.

Major exterior work, such as new construction, demolition, substantial alterations and use of non-historically appropriate materials are subject to review, a public hearing and decision by the Historic Resources Commission

Note: A pre-application meeting is available upon request prior to submitting this application.

Part 2. Property Information

| | |
|------------------|-----------|
| Project Address: | Tax ID #: |
|------------------|-----------|

Name of Landmark or Historic District:

Part 3. Project Information

Will the applicant be seeking State or Federal Historic Tax Credits for this project? Yes No

Proposed Project Description:

Part 4. Alteration or Repair Information (if new construction, skip to Part 5)

Select the type of work to be performed (check all that apply)

Painting
 Windows
 Doors
 Stoop/Rails
 Masonry
 Siding or Trim Work
 Fence or Wall
 Other:

Painting

| Building Area / Feature | Proposed Color: | Brand: | Collection: |
|-------------------------|-----------------|--------|-------------|
| Body | | | |
| Trim | | | |
| Sash | | | |
| Door | | | |
| Other: | | | |

(include attachment of sample paint chips for all elected colors)

Windows

Number of windows to be: _____ Repaired _____ Replaced _____ Altered

Location (attached a diagram if necessary):

| | |
|---|--|
| Existing Window Material (wood, vinyl, etc.): | Existing Window Condition: Original Not Original Not Sure |
|---|--|

Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.):

| | | |
|---|---|----------------|
| Width: | Height: | Depth: |
| If replacing, indicate the reason for replacement: | | |
| If altering, describe any proposed change (material, configuration, size of opening, etc.): | | |
| Doors | | |
| Number of doors to be: _____ Repaired _____ Replaced _____ Altered | | |
| Location (<i>attached a diagram if necessary</i>): | | |
| Existing Door Material (<i>wood, vinyl, etc.</i>): | Existing Door Condition: Original Not Original Not Sure | |
| Configuration (i.e. glass panes, divisions, decorative details and panels): | | |
| Width: | Height: | |
| If replacing, indicate the reason for replacement: | | |
| If altering, describe any proposed change (material, configuration, size of opening, etc.): | | |
| Stoops/Rails | | |
| Number of Stoops/Rails to be: _____ Repaired _____ Replaced _____ Altered | | |
| Existing Stoop Material (<i>stone, wood, concrete, etc.</i>): | Existing Condition: Original Not Original Not Sure | |
| Existing Treads: | Width: | Depth: Height: |
| Existing Rail Material (<i>iron, vinyl, wood, etc.</i>): | Existing Rails: Original Not Original Not Sure | |
| If replacing, indicate the reason for replacement: | | |
| If altering, describe any proposed change (material, configuration, size of opening, etc.): | | |
| Masonry | | |
| Type of Work: Substantial Reconstruction Minor Repair Repointing | | |
| Existing Material (<i>brick, stone, concrete, etc.</i>): | Existing Condition: Original Not Original Not Sure | |
| Location (<i>attached a diagram if necessary</i>): | | |
| Type of mortar to be utilized: | | |
| Siding or Trim Work | | |
| Type of Work: Full Residing Minor Repair Trim Work | | |
| Existing Material (<i>wood, stucco, vinyl, etc.</i>): | Existing Condition: Original Not Original Not Sure | |
| Location (<i>attached a diagram if necessary</i>): | | |
| Type of material to be utilized: | | |
| Fence of Wall | | |
| Type of Work: Repair Replacement | | |
| Existing Fence/Wall Material (<i>masonry, wood, vinyl, etc.</i>): | Existing Condition: Original Not Original Not Sure | |
| Location (<i>attached a diagram if necessary</i>): | | |
| Type of material to be utilized: | | |

Other / Additional Notes

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Part 5. New Construction or Addition Information (if repair only, skip to Part 6)

| | |
|--------------------------------------|-----------------------------------|
| First Floor Building Area (sq. ft.): | Total Gross Floor Area (sq. ft.): |
| Front Building Setback (ft.): | Frontage Buildout (ft.): |
| Building Height | Feet: |
| | Stories: |

Describe how the proposed construction will relate to the architectural scale, massing, volumes and styles represented within the applicable historic district:

Indicate the proposed materials to be utilized, distinctive architectural features and ornamentation:

Part 6. Signage Information (if no proposed signage, skip to Part 7)

| | | | | | | |
|---------------|-------------|--------------|-----------------|-------------------|--------|-----------------------|
| Sign 1 | Type: | Freestanding | Wall | Projecting | Awning | Location: |
| | Total Area: | | Width: | | Depth: | Projection from Wall: |
| | Material: | | Mounting Style: | | | |
| | Lighted: | Yes | No | If yes, describe: | | |
| Sign 2 | Type: | Freestanding | Wall | Projecting | Awning | Location: |
| | Total Area: | | Width: | | Depth: | Projection from Wall: |
| | Material: | | Mounting Style: | | | |
| | Lighted: | Yes | No | If yes, describe: | | |
| Sign 3 | Type: | Freestanding | Wall | Projecting | Awning | Location: |
| | Sign Area: | | Width: | | Depth: | Projection from Wall: |
| | Material: | | Mounting Style: | | | |
| | Lighted: | Yes | No | If yes, describe: | | |
| Sign 4 | Type: | Freestanding | Wall | Projecting | Awning | Location: |
| | Sign Area: | | Width: | | Depth: | Projection from Wall: |
| | Material: | | Mounting Style: | | | |
| | Lighted: | Yes | No | If yes, describe: | | |

Part 7. Submittal Requirement Checklist

| | Required Documents | Hard Copies | Electronic Submission * (.pdf) (Required Document Name) |
|--|---|-------------|--|
| A. Required for All Certificate of Appropriateness Applications | | | |
| | Master Application Form | 1 | Master Application |
| | Certificate of Appropriateness Application | 1 | COA |
| | Color photographs of the property in context with surrounding properties, on printed paper | 1 | Photos |
| B. Required for Alteration or Repair Applications | | | |
| | Materials sample sheets showing color type, manufacturer, and item number of new materials being proposed | 1 | Material Sample sheet |
| C. Required for New Construction and Additions | | | |
| | Elevation Drawing(s) | 1 | Elevations [YYYY]-[MM]-[DD] |
| | Floor Plan(s) | 1 | Floor Plan [YYYY]-[MM]-[DD] |
| | Vertical Building Section | 1 | Vertical Building Section |
| | Building Rendering(s) | 1 | Renderings [YYYY]-[MM]-[DD] |
| D. Required for Signage Applications | | | |
| | Color Sign Rendering | 1 | Sign Drawing |
| | Sign Mounting Detail | 1 | Sign Mounting Detail |
| | Sign or Awning Material Information | 1 | Sign Awning Information |
| E. Voluntary or Upon Request | | | |
| | Any additional information determined to be necessary by the Chief Planning Official | 1 | [Document Name] |

*Electronic document submissions shall be sent via email to planning@albanyny.gov, USB Flash Drive or by another medium approved by the City of Albany Planning Staff. CD and DVD submissions will no longer be accepted.