

HOPKINSVILLE HISTORIC PRESERVATION COMMISSION
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
ANVIRDALE

The Hopkinsville Historic Preservation Commission meets the 2nd Wednesday of each month at 4:00 PM in City Council Chambers of the Lackey Municipal Building, 101 North Main Street, Hopkinsville. Please submit this completed application to the Hopkinsville-Christian County Planning Commission no later than 28 days prior to the scheduled meeting.

Applicant Name _____ Date _____ Fee _____

Applicant Address _____

Phone Number _____ Fax
Number _____

E-mail Address _____

Name of Business(if applicable) _____

Property Owner Name & Address _____

Address of Proposed Changes _____

Description of Proposed Changes (attach drawings and photos):

Submit the following information with the application. See the [South Virginia Street-Alumni-Latham-Mooreland Design Review Guidelines](#) for detailed information on these requirements. The Commission cannot review your application until the necessary information is submitted.

New Construction
Scaled Drawings
Site Plan
Photographs
Materials List

Addition/Alteration
Photographs
Scaled Drawings
Materials

Demolition
Photographs
Current Evaluation
Demolition Cost

AUTHORIZATION

Names and signatures of all persons having an interest in the property whose consent is required (by virtue of such interest) to authorize filing of application. All signatures represent that they have full legal capacity to, and hereby do, authorize the filing of this application.

Name (Please Print)

(Check Owner or Lessee)

1. _____

_____ Owner _____ Lessee

Address _____

Signature

2. _____

_____ Owner _____ Lessee

Address _____

Signature

CERTIFICATION

I certify that the information and exhibits herewith submitted are true and correct to the best of my knowledge, and that I am to file this application and act on behalf of the signatories of the above authorization.

Signature

Date

Name (Please Print)

_____ Owner _____ Agent of Owner

Address _____

_____ Lessee _____ Agent of Lessee

_____ Other
(specify) _____

Telephone _____

Person to be contacted regarding matters pertaining to this application if other than myself:
