Entered on the National Register of Historic Places



Springville Historic Commission Application for Certificate of Appropriateness

APPLICANT INFORMATION:			
Name:	Phone #:		
Mailing Address:	Email:		
Property Address:	Parcel ID # Or PPIN:		
PROPERTY OWNER INFORMATION (if not applicant):			
Name:	Phone #:		
REQUEST(S) BEING MADE: (check all that apply) * Please note that additional permits may be required.			
Alteration/Renovation* Demolition* Paint Approval Sign Approval* Other*: Briefly explain what you would like to do:			
Applicant's Signature:		Date:	
Owner's Signature: (if not applicant)		Date:	
(FOR OFFICE USE ONLY)			
Documents Submitted: Application	Date Submitted: Historic Commission		
Paint Swatch(s)	Hearing Date:		
Photos	Public Posting &		
Plans and Specifications for Request(s)	Notice Mailed:		
Letter of approval from Owner, if not owner	Historic Commi Decision:	Historic Commission Approved Decision: Denied	

Please submit all documents to the Building & Zoning Department at PO Box 948, 151 Industrial Drive, Springville, AL 35146 or Zoning@cityofspringville.com

^{*} Historic Commission meets on the 3rd Thursday of each month (when called)