

# Architectural Review Board Application

## Determination of Architectural Appropriateness

*Note: This is **NOT** an application for a Building or Demolition Permit.*

Project Address:

Project Name:

Historic District (if applicable):

Applicant Name:

Applicant Address (ZIP):

Applicant Phone Number:

Applicant E-mail:

Property Owner (if different from applicant):

Property Owner Address:

Owner Phone Number:

Owner E-mail:

Property Owner Signature:

Will the applicant or the property owner attend the Architectural Review Board Meeting?

Applicant

Property Owner

Other:

**Relevant Zoning Standard** (Select which zoning standard applies.)

[Section 5.9.2.B\(3\)](#): Exemption from Form Standards in a Historic & Cultural District or Historic Overlay District

[Section 5.10.B\(2\)](#): Exemption from Neighborhood Protection Standards

Other: Include the zoning standard citation here:

**Briefly describe the project:**

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**BEFORE you submit:**

Have you spoken with a member of ARB or City Planning Staff about your application?

Yes; Name of Contact:

No

Have you completed the relevant application checklist?

Yes  No

Does your project require any of the following:

- Encroachments into the public right-of-way
- Conditional Use Permits
- Zoning Variances

Have you done any public engagement (e.g.: sharing application with civic league/homeowners' association)?

No

Yes; Description of Engagement:

If yes, have you met with the respective City agencies?

Yes; Name of Contact:

No