



Resilient Environment Department

URBAN PLANNING DIVISION · Historic Preservation Program

1 N. University Drive, Box 102 · Plantation, FL 33324 · T: 954-357-9731 · Broward.org/History

Application for Certificate of Appropriateness

All applications must include:

- Two (2) current color photographs of the property (*front and rear*)
- Color photographs of all proposed work areas
- Property survey showing existing conditions
- Site plan showing proposed changes (if applicable)

Additional information may be required, including but not be limited to: project plans and elevations (hard copies and/or digital); additional drawings or images; manufacturer's brochure(s) or catalog information; paint and material samples; landscape plans; and any other information requested by Historic Preservation staff in order to review the application work.

This application will not be processed for review until all required information is received, accepted and determined "complete" by the Historic Preservation Officer. **All applicants should schedule a pre-application meeting with the Historic Preservation Officer before submitting this form.**

Property Information			
Folio No.			
Address	City	State	Zip
Site Designation Name (<i>if applicable</i>)			
District Designation Name (<i>if applicable</i>)			

Property Owner Information			
Property Owner(s)			
Address	City	State	Zip
Phone	Mobile Phone	Email	

Applicant Information

Applicant is the: Owner Contractor Architect Legal Agent/Attorney Other

Describe relationship to owner if "other" is checked:

Name (if different from owner)

Address

City

State

Zip

Phone

Mobile Phone

Email

Project Type

Check all that apply:

- New Construction Rehabilitation Restoration Relocation/Moving Ground Disturbance/Excavation
 Exterior Painting Repairs Interior Demolition Major Landscaping

Project Description

Describe the project in detail, including any new construction or additions, removal or demolition work, replacement of existing materials and any and all other proposed changes or alterations to the property and structure (attach additional sheet if necessary for complete project description).

Project Description *(continued)*

Check any of the following that will *(or may)* be affected by this project:

- | | | | | |
|---|--|--------------------------------------|---|---|
| <input type="checkbox"/> Main Building | <input type="checkbox"/> Roof(s) | <input type="checkbox"/> Foundation | <input type="checkbox"/> Building Walls | <input type="checkbox"/> Ancillary/Secondary Building |
| <input type="checkbox"/> Exterior Painting | <input type="checkbox"/> Repairs | <input type="checkbox"/> Interior | <input type="checkbox"/> Demolition | <input type="checkbox"/> Architectural Elements |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Window(s) | <input type="checkbox"/> Door(s) | <input type="checkbox"/> Shutters/Louvers | <input type="checkbox"/> Siding/Stucco/Facades |
| <input type="checkbox"/> Steps/Stairs | <input type="checkbox"/> Walls/Fences | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Walkways | <input type="checkbox"/> Garage/Porte Cochere |
| <input type="checkbox"/> Patios/Courts | <input type="checkbox"/> Patio Element | <input type="checkbox"/> Porch | <input type="checkbox"/> Open Space | |
| <input type="checkbox"/> Other <i>(please describe)</i> : _____ | | | | |

Owner Certification

I hereby certify, to the best of my knowledge, that the information provided within this application is correct, complete and accurately portrays the proposed project.

Owner's Signature

Date

Applicant's Signature *(if other than owner)*

Date

Mail this application and all supporting documents to:

Broward County Urban Planning Division
Attention: Broward County Historic Preservation Officer
1 North University Drive, Box 102
Plantation, FL 33324

Questions? Please call (954) 357-9731

Owner Certification

This is to certify that I am the owner of the property described on the attached survey and I have authorized the filing of this request. My ownership interest is _____ percent.

Owner's Signature

Print Name

NOTARY PUBLIC

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me, the undersigned Notary Public, by means of

physical presence or online notification, this _____ day of _____, _____,

by _____ who is:

Personally Known to me, or Produced Identification

Type of identification produced _____.

(NOTARY SEAL)

Signature of Notary Public-State of Florida

Name of Notary Typed, Printed or Stamped

Agent/Petitioner Authorization

I, _____, the legal owner of the real property described herein that is the subject of this application, do hereby authorize and designate _____ of _____ to be my lawful representative in all matters pertaining to this application.

Owner's Signature

Print Name

NOTARY PUBLIC

**STATE OF FLORIDA
COUNTY OF BROWARD**

The foregoing instrument was acknowledged before me, the undersigned Notary Public, by means of physical presence or online notification, this _____ day of _____, _____, by _____ who is:

Personally Known to me, or Produced Identification

Type of identification produced _____.

(NOTARY SEAL)

Signature of Notary Public-State of Florida

Name of Notary Typed, Printed or Stamped

Additional Information (Supplementary Sheet)