

CITY OF SPRINGBORO, OHIO  
ARCHITECTURAL REVIEW BOARD

APPLICATION FOR  
CERTIFICATE OF APPROPRIATENESS

Any exterior changes made to buildings, outbuildings, landscape, or features located within the Springboro Preservation District or to an individually designated historical landmark shall not be permitted unless and until a Certificate of Appropriateness for such action is issued by the Architectural Review Board. The Architectural Review Board will review plans and specifications, monitor work in progress, and administer Chapter 1229 of the Codified Ordinances of the City of Springboro.

Contact the City Planner for the time and location of the Architectural Review Board meetings. You are welcome to appear before the Board in support of your application.

- ☐ Preservation District  
☐ Historical Landmark

Property Address: \_\_\_\_\_

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Contractor: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

(Notification of Architectural Review Board action will be mailed to owner, unless otherwise requested.)

Request for: ☐ Principal structure ☐ Carriage house, garage, outbuilding  
☐ Painting/roofing (see 2<sup>nd</sup> page) ☐ Other \_\_\_\_\_

**DESCRIPTION OF WORK TO BE DONE**

*Be sure to specify the exact location on the structure, the nature of the work, the materials used, and the existing historic features repaired or replaced. Landscaping, fencing, etc. should include a sketch of the property showing the proposed location. In order to make an appropriate, fair, and timely decision, the Architectural Review Board may require additional detailed information such as sketches, photographs and information about the proposed materials to be used (e.g., brochures, paint chips, catalog data). The Board will be happy to help you with this. For changes in paint colors and roofing, please complete the questions on the next page.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Roofing and Repainting

Existing Fixed Colors:

- ☐ Existing roof colors: \_\_\_\_\_
- ☐ Unpainted brick, house or porch: \_\_\_\_\_
- ☐ Other fixed colors: \_\_\_\_\_

If your project includes roofing:

Please describe the kind of material (slate, metal, asphalt/fiberglass, built-up flat roof, etc.) existing: \_\_\_\_\_

Is it dimensional? (Diamond-shape, rounded, imitation wood shake or slate, standing seam metal, etc.) \_\_\_\_\_

Proposed new roof (manufacturer, color, material, pattern, etc.) \_\_\_\_\_

If your project includes repainting:

Paint manufacturer or color palette: \_\_\_\_\_

Color Name	Color Number	Location on Structure
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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FOR OFFICE USE ONLY

Application Filed: ☐ In Person ☐ By mail ☐ Fax  
☐ From Building Department ☐ Phone

Taken by: \_\_\_\_\_ Date: \_\_\_\_\_

Date received Architectural Review Board Office: \_\_\_\_\_, 200\_\_\_\_

Scheduled for Meeting of: \_\_\_\_\_, 200\_\_\_\_

Architectural Review Board Action on Request: \_\_\_\_\_, 200\_\_\_\_

Project Completed as Approved? ☐ Yes ☐ No