

**CITY OF SPRINGOBRO, 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: _____

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 2nd 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, irritation 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: _____

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