

**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 is not be permitted unless and until a Certificate of Appropriateness for such action is issued by the Architectural Review Board (ARB). The ARB 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 ARB meetings. Applicants are encouraged to appear before the ARB in support of their applications.

Preservation District  
 Historical Landmark

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

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

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

E-mail Address: \_\_\_\_\_

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

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

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

(Notification of ARB 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**

*Be sure to specify the exact location on the structure, the nature of the work, the materials to be used, and the historic features to be 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 ARB 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 ARB will be happy to help you with this. For changes in paint colors and roofing, please complete the questions on the next page.*

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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 a new exterior paint color scheme:

Please indicate paint manufacturer: \_\_\_\_\_

Please indicate color palette below:

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

Applicants are encouraged to provide manufacturer paint chips along with their application.

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