APPLICATION FOR CERTIFICATE OF APPROPRIATENESS FOR THE CITY OF PASCO REGISTER OF HISTORIC PLACES



Date Received	
Amount Due	 _
Fee Paid	
Master File #	
Hearing Date	

CITY OF PASCO
HISTORIC PRESERVATION COMMISSION
CITY HALL, SECOND FLOOR
525 N 3RD AVE
PASCO, WA 99301
(509) 545-3441
Fax (509) 545-3499
adamsj@ci.pasco.wa.us

Property Address:	
Applicant/Owner:	
Mailing Address:	
Email Address:	
Daytime Phone:	Fax:
IMPORTANT: PLEASE READ THE GENERAL I COMPLETING THE APPLICATION FORM.	INFORMATION BOOKLET CAREFULLY BEFORE
A Certificate of Appropriateness is requested	for:
☐ Exterior remodeling or change of color	
$\hfill \square$ New construction (an addition or a new building	ng)
☐ Sign(s)	
☐ Demolition	
☐ Preliminary Review	
☐ Change of use	
Estimated cost of proposed work:	
\$	
You may be required to provide: ☐ Scale drawings (plans, elevations, sections, d	details)
☐ Photographs slides	

Please describe proposed work in the s	pace below (or attach a description):
Will you be removing or covering any o orackets, trim, windows, etc.)	riginal architectural features? If so, please specify (i.e. soffit,
hough, could, that I am the accuracy of the	
	property or that the proposed work is authorized by the owner of record o make this application as his/her authorized agent.
Many certificates can be approved by sta Preservation Commission for review. If the Preservation Commission for review. If the Dearing notice will be published. The Co Chambers, City Hall, 525 N 3 rd Avenue, a courteen days prior to the scheduled me	o make this application as his/her authorized agent. If within a few working days, however, some are referred to the Historication is referred to the Commission, I understand that a public mmission meets the Second Wednesday of every month in the Council 17:00 pm. The completed application must be submitted no later than beeting. Once a Certificate of Appropriateness is obtained, it may be
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