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:				
			Fax:	
IMPORTANT: PLEAS COMPLETING THE A	SE READ THE GENER PPLICATION FORM.	RAL INFORMATION	N BOOKLET CAREF	ULLY BEFORE
A Certificate of Appr	opriateness is reques	sted for:		
☐ Exterior remodelin	g or change of color			
☐ New construction	(an addition or a new b	ouilding)		
☐ Sign(s)				
□ Demolition				
☐ Preliminary Review	N			
☐ Change of use				
Estimated cost of pro	pposed work:			
	\$		-	
You may be required ☐ Scale drawings (p	to provide: lans, elevations, section	ns, details)		
☐ Photographs, slide	es			

☐ Finish samples	
Please describe proposed work in the space b	pelow (or attach a description):
Will you be removing or covering any original orackets, trim, windows, etc.)	architectural features? If so, please specify (i.e. soffit,
hereby certify that I am the owner of the proper and I have been authorized by the owner to make	rty or that the proposed work is authorized by the owner of record this application as his/her authorized agent.
Many certificates can be approved by staff within Preservation Commission for review. If the apprearing notice will be published. The Commission Chambers, City Hall, 525 N 3 rd Avenue, at 7:00 ourteen days prior to the scheduled meeting.	e this application as his/her authorized agent. n a few working days, however, some are referred to the Historic plication is referred to the Commission, I understand that a public ion meets the Second Wednesday of every month in the Council pm. The completed application must be submitted no later than Once a Certificate of Appropriateness is obtained, it may be
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