

City of Idaho City
Historic Preservation Commission
511 Main Street
P.O. Box 130
Idaho City, ID 83631
Phone (208) 392-4584
Email: 4cityfolk@gmail.com

Application for Certificate of Appropriateness

Applicant (Person in Charge) _____ Phone _____

Owner _____ Purchaser _____ Lessee _____ Other _____

Applicant's Address _____
_____ ZIP _____

CERTIFICATE OF APPROPRIATENESS IS REQUESTED FOR:

_____ Building/Other Structure _____ Sign(s) _____ Demolition

**NAME/ADDRESS OF PROPERTY WITHIN THE HISTORIC DISTRICT FOR WHICH
CERTIFICATE IS REQUESTED:**

**LEGAL DESCRIPTION: LOT _____ BLOCK _____ OR ATTACH ANY METES &
BOUNDS DESCRIPTIONS.**

Current use? _____

Is there a change in the use of the building or lot? _____

**What exterior changes are being proposed to the building(s), other structures, signs and or
the site? Note the proposed construction materials you will use for the exterior features.
In the case of demolition, state reasons for demolition (use extra paper to complete this).**

SUBMITTALS REQUIRED:

1. Detailed plans (to scale) showing all proposed changes. Plans should show the proposed architectural design, including elevations.

2. In the case of sign(s), a colored rendering and scaled drawing of the proposed sign(s) including style of lettering dimensions of all sign faces and materials to be used should be submitted.

3. Site plan of the project proposed, drawn to scale, showing actual dimensions and shape of the lot, specifying location of changes, sign(s) or demolition.

4. Vicinity map (8 1/2" x 11") 1"=300' scale minimum, showing location of the property.

NOTE: WHEN AN APPLICATION HAS BEEN SUBMITTED, IT WILL BE REVIEWED IN ORDER TO DETERMINE COMPLIANCE WITH APPLICATION REQUIREMENTS. REVIEW IN FRONT OF THE COMMISSION WILL BE SCHEDULED ONLY AFTER AN APPLICATION HAS BEEN ACCEPTED AS COMPLETE.

I HEREBY ATTEST TO THE TRUTH AND EXACTNESS OF ALL INFORMATION SUPPLIED IN THE FOREGOING APPLICATION.

Signature of Applicant

Date

TO BE COMPLETED BY THE HISTORIC PRESERVATION COMMISSION

CONDITIONS/RECOMMENDATIONS: _____

Date Approved: _____

Approved By: _____

Historic Preservation Commission