



**OLD TOWN DESIGN REVIEW
COMMITTEE
APPLICATION**



Owner/s (name):	
Company Name:	
Mailing Address:	
Work #:	Cell #:
E-Mail:	
Owner Signature (Owner/s Must Sign or Submit Letter of Authorization):	Date:
Printed Name:	

Applicant/Tenant (name):	
Company Name:	
Mailing Address:	
Work #:	Cell #:
E-Mail:	
Applicant/Tenant Signature	Date:
Printed Name:	

Architect/Engineer (name):	
Company Name:	
Mailing Address:	
Work #:	Cell #:
E-Mail:	
Architect/Engineer Signature	Date:
Printed Name:	

REQUIRED:

- Narrative letter summarizing scope of work
- Site plan/roof plan (drawn to scale)
- Proposed building elevations (to scale)
- Photographs of existing building conditions
- Product literature or specifications
- Materials samples and color samples

NOTE:

Items must be staff approved and deemed complete before they will be placed on an agenda