

PLANNING AND DEVELOPMENT

225 4th Street North

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APPLICATION FOR CERTIFICATE OF APPROPRIATENESS WITHIN A HISTORIC DISTRICT

No building permits for new construction or for alterations to the exterior of existing structures shall be issued for property within a Historic Overlay district until a Certificate of Appropriateness has been reviewed and approved in accordance with the procedures with Section 20-0912. A Certificate of Appropriateness may be reviewed and issued by The Historic Preservation Commission and or City Staff, depending on the type of project and the Historic Overlay district. The Historic Preservation Commission meets monthly at 8:00 am on the third Tuesday of the month, in the City Commission Room, City Hall, 200 3rd Street N. Applicants must be present at the meeting. More information on design standards is available at: www.FargoND.gov/historicpreservation.

The following must accompany this application:

- a. Photos of the existing site
- b. Plans of the proposed project
- c. Building materials
- d. Site plan if applicable

Property Owner Information	Representation Information (primary contact)	
Name (printed):	Name (<i>printed</i>):	
	Company	
Address:	Address:	
Primary Phone:	Primary Phone:	
Alternative Phone:	Alternative Phone:	
Email:	Email:	
	☐Same as property owner	
Location of property involved in the application decision		
Historic overlay district of subject property :		
Address:		
Legal Description (attach separate sheet if more space is needed):		
Check each of the following which applies to your project		
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Exterior remodelWindow replacement	☐ New garage☐ New accessory structure (not garage)	
☐ New dormer	☐ New porch	
New/replacement chimney	Front yard paving	
☐ Skylight☐ Overhead garage door replacement	☐ Demolition ☐ New addition	
Other:		

Briefly describe the proposed work		
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Acknowledgement – We hereby acknowledge that we have familiarized ourselves with the rules and regulations to the preparation of this submittal and that the forgoing information is true and complete to the best of our knowledge.		
Owner (Signature):	Date:	
Representative (Signature):	Date:	