BOROUGH OF LEWISBURY

HISTORIC DISTRICT APPLICATION FOR A
CERTIFICATE OF APPROPRIATENESS

This permit applies only to those properties located within the Lewisburg Historic District. Please fill out the information requested below and return this application to the Lewisburg Borough Zoning Administrator at the Central Keystone Council of Governments, 1610 Industrial Boulevard, Suite 400A, Lewisburg, PA 17837.

PROPERTY INFORMATION

Property Owner – Name & Address
_________________________________________________________
_________________________________________________________
_________________________________________________________

Phone ___________________ Evening
Phone ___________________ Day
Fax _____________________

Property Address (if different from above)
_________________________________________________________

Contact Person (if different from above)
_________________________________________________________

Phone ___________________

Relation to Property Owner ____________________________________________

<table>
<thead>
<tr>
<th>PROPERTY TYPE</th>
<th>BUILDING TYPE</th>
<th>PROJECT TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Single-Family Residential</td>
<td>☐ Main Structure</td>
<td>☐ Addition</td>
</tr>
<tr>
<td>☐ Multi-Family Residential</td>
<td>☐ Accessory Structure</td>
<td>☐ Renovation</td>
</tr>
<tr>
<td>☐ Commercial</td>
<td>☐ Garage</td>
<td>☐ New Construction</td>
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<tr>
<td>☐ Other __________________________</td>
<td>☐ Fence</td>
<td>☐ Demolition</td>
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<tr>
<td></td>
<td>☐ Outbuilding / Shed</td>
<td>☐ Signage</td>
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<tr>
<td></td>
<td>☐ Deck</td>
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PROJECT DESCRIPTION: Use this space to describe in detail the changes you plan to make to your property. Required information includes any changes in size or shape to the existing structure(s), any changes to exterior materials, changes to size, number, or type of windows & doors, etc. Please attach any photographs, sketches, and/or drawings that help describe your project. Product advertisements, material or spec sheets (if available) are recommended, when applicable.
## PROJECT MATERIALS
(Please attach additional sheets, if needed)

<table>
<thead>
<tr>
<th>Architectural Features (doors, windows, siding, etc.)</th>
<th>Original Material</th>
<th>Proposed Material</th>
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I hereby certify that the proposed work is authorized by the owner of record and that the work shall conform to all applicable laws of this jurisdiction. By receiving a Certificate of Appropriateness, I realize that a Building Permit and/or Zoning Permit will also be required prior to proceeding with the work outlined above.

**SIGNATURE**

**DATE**

**PRINTED NAME**

**TITLE**

### DO NOT WRITE BELOW THIS LINE – BOARD USE ONLY

<table>
<thead>
<tr>
<th>Application complete (Required)</th>
<th>Reviewed by Staff</th>
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</thead>
<tbody>
<tr>
<td>Photographs attached (Required)</td>
<td>Conditions Reviewed by Building Inspector</td>
</tr>
<tr>
<td>Graphic Description attached (Required)</td>
<td>Flood Plain</td>
</tr>
<tr>
<td>Other Commission / Board Hearings (Required)</td>
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</tbody>
</table>

**Decision**

- [ ] Recommended for approval  
  **Date**
- [ ] Not recommended for approval  
  **Date**
- [ ] Remanded for future consideration  
  **Date**

**Reasons or Conditions**

- [ ]  
- [ ]  
- [ ]

**Motion by:** EW TS AH KW SS EF DH  
**Seconded by:** EW TS AH KW SS EF DH

**VOTING RECORD:** [ ] Unanimous  
**Votes for:** EW TS AH KW SS EF DH  
**Votes against:** EW TS AH KW SS EF DH

**Signature**  
**Date**

Chairperson, HARB

**Signature**  
**Date**

Council President