



MILTON

Application for Certificate of Appropriateness (COA)

Pursuant to NC GS 160A-400.9

Applicant's Name, Address, Phone Number:

Owner's Name/Mailing Address (if different from above):

A complete application, including required items and any additional information requested by the Planning Board/Historic Preservation Commission, must be submitted no later than two weeks prior to the next regularly scheduled meeting. The Planning Board/HPC meets monthly on the 2nd Monday at 6 pm at the Milton Town Hall/Thomas Day Museum, 148 Broad Street, Milton, North Carolina, 27305.

An application fee of \$25.00 is required at time of submittal.

Attach a detailed description of work to be done. Minor project descriptions must include hand drawings, photos, material samples, etc. Major project descriptions must include the above plus, but are not limited to: architectural, floor, site, and grading plans, architectural elevation drawings of each façade with measurements and specifications clearly showing exterior appearance of project such as exterior materials (including paint color), window style/dimensions, and roof pitch.

TYPE OF PROJECT:

MINOR: _____

Examples (Read Design Guidelines for Individual Criteria)

- Fences and Walls
- New patios and/or parking areas which are located to rear of existing buildings (not easily seen from street)
- Roof Covering
- Painting (when major change in exterior color, provided new color is similar to those found in Historic District)
- Foundation, Foundation Vents, Access Doors (which can be seen from streets)
- Storm Doors and Windows
- Masonry Repairs
- Signs (signage must be in accordance with Milton Historic Preservation Commission Guidelines)
- Siding
- Stairs, Landings and Steps
- Replacement of Missing details
- Other Minor Construction
- Landscaping (removal of tree(s) over 6" diameter)
- Mechanical Equipment

MAJOR: _____

Examples (Read Design Guidelines for Individual Criteria)

- New Construction/Reconstruction + Parking (associated with)
- Roofline Changes
- Additions to Dwellings/Buildings
- Rehabilitation of Existing Buildings
- New Accessory/Storage Buildings
- Minor works not approved by Historic Preservation Commission
- Demolition and/or Moving of any Structure (or part thereof)
- Replacement of Architectural Details
- Fences (any type of front yard or repair/ replacement of front yard fence not matching original materials)



Please read the following statements. Your signature below acknowledges that you have read the statements and attest to their accuracy:

Check one: I am the Owner of the Property, or

I am acting on behalf of the owner of the property and I have attached

a letter from the owner(s) indicating their knowledge of this application.

- I understand submittal of this application does not constitute approval of proposed alterations.
- I understand the approval of this application by Town Staff or the Milton Historic Preservation Commission (MHPC) does not constitute approval of other federal, state, or local permit applications.
- I understand I (or my representative) will need to attend the Hearing of this Application by MHPC. No Applications shall be heard without a representative present and all applicable fees paid in full.
- I have reviewed the Town of Milton's "Historic District Guidelines" in preparing this Application.
- I understand the property referenced by this CoA application is in Milton's historic district and that it represents a part of Milton's historic fabric. If a CoA is approved by the Milton Planning Board/Historic Preservation Commission, I agree to implement all changes as specified in the approved CoA, including any conditions. I understand that I am responsible for contacting Milton Planning Board/Historic Preservation Commission if I have any questions regarding the allowed changes specified in the approved CoA.
- I understand ANY unapproved alterations are enforceable as a violation of Town Ordinance and must be brought into compliance by removal or through the CoA process.
- I affirm all the information included in this application is true to the best of my knowledge.
- I understand incomplete applications cannot be considered.

Applicant's Signature and Date: _____

Submit application to: Town of Milton, c/o Planning Board, P.O. Box 85
Milton, North Carolina, 27905
Phone: 336-234-0080 Fax: 336-234-0080
Office hours: Tuesdays 9am-5 pm and Thursdays 4-7 pm.

For office use only: date received and initials _____

Date completed and comments _____

July 6/2020