



**CITY OF ORMOND BEACH**

v3.2013

Planning Department

22 South Beach Street, Ormond Beach, FL 32174

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**CERTIFICATE OF APPROPRIATENESS - APPLICATION**

*For Planning Department Use*

Application Number

Date Submitted

**APPLICATION TYPE AND FEES**

	Application	Advisory Board	Total*
<input type="checkbox"/> Certificate of Appropriateness, Alteration	\$300	\$300	\$600
<input type="checkbox"/> Certificate of Appropriateness, Demolition	\$400	\$300	\$700
<input type="checkbox"/> Certificate of Appropriateness, Relocation	\$300	\$300	\$600

\*The total is calculated as the Application plus approximate Advisory Board and Commission Public Notification Fees. Depending on the actual costs, Staff shall refund any remaining balance or require additional payment. Please note that for Certificates of Appropriateness for Demolition, there may be additional costs for independent consultation.

**APPLICANT INFORMATION**

This application is being submitted by:  Property Owner  Agent on behalf of Property Owner\*

Name

Full Address

Telephone  Email

\* If this application is being submitted by a person other than the property owner, please provide the following Property Owner Information as well as a notarized letter designating you as agent.

**PROPERTY OWNER INFORMATION\*\***

Name

Full Address

Telephone  Email

\*\* If the property owner does not reside on the property for which the application refers, please provide the following details.

**PROPERTY DETAILS**

Full Address

Parcel ID Number

Legal Description

**ALTERATION DESCRIPTION**

If this application is for a Certificate of Appropriateness, Alteration, please provide a detailed description of the request and an explanation of how the request meets the U.S. Department of the Interior Secretary's Standards for Preservation and Rehabilitation.

Description:

[Empty text box for Alteration Description]

**RELOCATION DESCRIPTION**

If this application is for a Certificate of Appropriateness, Relocation, please provide a detailed justification for the proposed relocation.

Description:

[Empty text box for Relocation Description]

**DEMOLITION DESCRIPTION**

If this application is for a Certificate of Appropriateness, Demolition, please provide a detailed justification for the proposed demolition.

Description:

[Empty text box for Demolition Description]

**CERTIFICATION**

I hereby certify that the information provided above is true and correct to the best of my knowledge and that I am aware of the application submittal requirements and review process for this application. I hereby authorize the City of Ormond Beach Staff to visit my property and to take pictures pertaining to my request. I am aware of the required pre-application meeting and am aware that if all of the required information is not provided, my application will be continued to the next regularly scheduled meeting.

Signature: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_, 20\_\_, by \_\_\_\_\_,  
as \_\_\_\_\_ (title\*) for \_\_\_\_\_ (name of corporation\*),  
who ( ) provided \_\_\_\_\_ as identification, or ( ) who is personally known to me.

\_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires:

\* If you are executing this document on behalf of a corporation please complete the spaces with your title and the name of your company as indicated.