



132 East Broad Street • P.O. Box 507 • Linden, Michigan 48451-0507  
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# CERTIFICATE OF APPROPRIATENESS (HISTORIC DISTRICT) APPLICATION

SECTION TO BE FILLED OUT BY APPLICANT

Resource Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ ZIP \_\_\_\_\_

Resource on National Register: yes \_\_\_\_ no \_\_\_\_ State Register: yes \_\_\_\_ no \_\_\_\_

Description of Proposed Work (Include existing materials and proposed materials, color selections, and lettering styles): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach conceptual drawing or sketch of proposed work)

Fire Alarm System/Smoke Alarm: PA 67 of 2004 amending PA 169 of 1970 has been amended to require project applicants to certify that on or before the date of completion of proposed work their buildings will have a code compliant smoke detector or fire alarm system. Failure to provide such certification will constitute an incomplete application. **I CERTIFY THAT ON OR BEFORE THE DATE OF COMPLETION OF THE PROPOSED WORK THE BUILDING WILL HAVE A CODE COMPLIANT SMOKE DETECTOR OR FIRE ALARM SYSTEM.**

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

This certificate of appropriateness application and any supporting documents must be submitted and all fees paid at least 14 days prior to the next regularly scheduled Historic District Commission meeting.

**Certificate of Appropriateness Application Fee: \$50**

I certify that the information given herein is true and correct to the best of my knowledge:

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

THIS SECTION FOR HDC USE ONLY

Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Referred to HDC Meeting Date: \_\_\_\_\_

HDC Action: \_\_\_\_\_ approved \_\_\_\_\_ denied

Approved with the following conditions: \_\_\_\_\_  
\_\_\_\_\_

Signature of Chairperson: \_\_\_\_\_

Date: \_\_\_\_\_

Final Inspection Signature: \_\_\_\_\_

Date: \_\_\_\_\_