

CERTIFICATE OF APPROPRIATENESS APPLICATION  
**HISTORIC DISTRICTS**

**Date** \_\_\_\_\_

**Number** \_\_\_\_\_

**Property Owner Name, Address & Phone Number**

**Applicant Name, Address & Phone Number**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Phone** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Building/Site Location**

**Legal Description**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Block** \_\_\_\_\_ **Lot** \_\_\_\_\_

**Subdivision** \_\_\_\_\_

**Tax Map #** \_\_\_\_\_

**Occupancy/Use** \_\_\_\_\_

**Request/Description of Work to be Done**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Drawings/Sketches Attached**

**Yes**                       **No**

**Photographs Attached**

**Current**                       **Historic**

**Material Sample (s) Attached (Please List)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that this information is correct to the best of my knowledge and that the said work will be done in conformance with all submissions herein set forth, and in compliance with the City of Walterboro's Historic Overlay District Ordinances and Building Codes.

\*\* APPROVAL OF A CERTIFICATE OF APPROPRIATENESS DOES NOT  
CONSTITUTE APPROVAL OF OTHER REQUIRED BUILDING PERMITS. \*\*

**Signed** \_\_\_\_\_

**Print Name** \_\_\_\_\_

**Owner or Contractor**

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**Office Use**

**Approved**

**Approved with Conditions** \_\_\_\_\_

**Denied**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

X \_\_\_\_\_  
**Chair - Historic Preservation Commission**

X \_\_\_\_\_  
**Member - Historic Preservation Commission**

X \_\_\_\_\_  
**Planning & Zoning Official**

**Date** \_\_\_\_\_