## CITY OF CAMDEN

# DEPARTMENT OF PLANNING AND DEVELOPMENT CERTIFICATE OF APPROPRIATENESS APPLICATION

# Please return completed form to:

Property Address:		District:	
Owner's Name:		Block:Lot: _	
Owner's Address:		Email:	
		Phone:	
~	TED ACTION (check one)		
	Rehabilitation/Restoration/Reco	nstruction	
	New Construction/Infill		
D			
E	Demolition (see item #5, below) Extension of Work Deadline (see		
		- i4 # <b>6</b>	

3. PHOTOGRAPHS (Please attach and list photos of major façade, including Historic photos of available.

#### 4. DESCRIPTION OF PROPOSED WORK

Please attach a written description of any work that will be done to the exterior of the building, including landscaping. Note what action will be taken on the original structure's entrance, window, wall fabric, roof, architectural or landscape detailing, lighting, utility connection etc. This information may also be included on architectural drawings.

## 5. DEMOLITION (if requested)

Please attach a written explanation detailing why demolition is necessary. Attach any pertinent information documenting financial hardship, health and safety requirements or plan for new construction that any necessitate demolition.

## 6. EXTENSION OF WORK DEADLINE (if requested)

Please attach a written explanation identifying why a work extension is requested. State any pertinent technical, legal, or financial circumstances that have change since the original Certificate of Appropriateness was granted by the City of Camden Planning Board. State any building conditions that have changed since the date of Planning Board approval and any changes from the originally approved scope of work.

NOTE: The approved work must commence within one year of the date of Planning Board approval; otherwise, a new Certificate of Appropriateness is required.

7. APPLICATION FEE (please attach a check or money order payable to the City of Camden)

	· ·	, i	,
	\$34.10 (Sign Application)	\$38.19 (ALL othe	r Applications)
	TIONAL INFORMATION (Please list ation)		
I $HA$	PERTY OWNER'S PERMISSION (IF N AVE READ THIS APPLICATION UMENTS HEREBY CONSENT TO ITS	OT APPLICANT) AND EXAMINED TH	
Signature	:	Date:	
	ICANT'S STATEMENT by attest that the information I have prov	ided is, to the best of my kno	wledge correct.
Signature	<b>:</b>	Date:	

PLEASE NOTE: Complete applications required documents and fees must be received by the Secretary of the Historic Preservation Commission at least ten (10) days in advance to the published meeting date. Applicants MUST attend both the Historic Preservation Commission and subsequent Planning Board meeting for the application to be heard. The action of the Historic Preservation Commission and the Planning Board do not assure Federal certification of the work done for the historic preservation tax credits allowed under Federal law.

(Revised/Effective 10/21/2025)