

**APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
FROM DESIGN REVIEW BOARD
CITY OF LANDRUM, SOUTH CAROLINA**

Owner Information:

Name:
Address:
City:
State:
Phone: ()
Fax: ()
CONTACT PERSON:

Representative Information:

Name:
Address:
City:
State:
Phone: ()
Fax: ()
CONTACT PERSON:

Property ID Number: _____
Gross Acreage of Property: _____
Existing Land Uses: _____
Adjacent Land Uses: North: _____
South: _____

Address of Subject Property: _____
Number of Parcels: _____
Existing Zoning: _____
East: _____
West: _____

Verify your land use and zoning categories on the Land Use and Zoning Maps

Project Information

Check any alterations that apply:

<input type="checkbox"/> New Construction	<input type="checkbox"/> Chimney	<input type="checkbox"/> Driveway	<input type="checkbox"/> Parking
<input type="checkbox"/> Additions	<input type="checkbox"/> Porch	<input type="checkbox"/> Deck	<input type="checkbox"/> Landscaping
<input type="checkbox"/> Exterior Walls	<input type="checkbox"/> Balcony	<input type="checkbox"/> Garage	<input type="checkbox"/> Exterior Lighting
<input type="checkbox"/> Exterior Trim	<input type="checkbox"/> Windows	<input type="checkbox"/> Signage	<input type="checkbox"/> Mechanical Equipment
<input type="checkbox"/> Exterior Color	<input type="checkbox"/> Fence/Walls	<input type="checkbox"/> Walkway	<input type="checkbox"/> Relocation of Structure
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Roof	<input type="checkbox"/> Doors	<input type="checkbox"/> Demolition of Structure

Additional Information Required For Application Review

1. Description of proposal: _____
2. One copy of the site plan.
3. One copy of a property survey.
4. Drawing or drawings that include the building schematic design and building elevations.
5. Description of exterior building materials.
6. Any other information in support of your application: _____

INCORRECT INFORMATION WILL VOID PERMIT APPROVAL.

I hereby certify that the information detailed in this request is correct.

Signature of Property Owner

Date

Signature of Representative if not
the property owner

Date

For Office Use Only

Application Number: _____

Signature of City Official

Date