Certificate of Appropriateness

Plains Historic Preservation Commission

1. Name of Applicant:		
You or your representative time, date and location of the	must be present at the meeting of the Board. You will be no he meeting.	tified of the
Mailing Address:	Zip Code:	
Daytime Telephone:		
Relationship of Applicant to	Property: Owner () Architect () Contr actor () Other, Please Specify ()	
2. Nature or Proposed Wor	rk:	
() New Construction() Demolition() Repairs or Alterations() Fences() Other	() Moving of Building() Sign Erection or Placement() Awning() Landscaping	
TO 1	sed work as simply and accurately as possible. Use the attac ou in your description. Be sure to indicate materials to be may be necessary.	
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1/2		14
100		18
		E.
	(Use extra sheet, if necessary)	
the approval of any change	be completed before the Plains Preservation Commission can affecting the appearance of any building within the Historic u are encouraged to contact the City Preservation Officer, C	District.
229-824-5445.	INATURE OF APPLICANT	