

**City of Water Valley Historic  
Preservation Commission**

101 Blackmur Drive, Water Valley, MS 38965  
Email: wvch@bellsouth.net (662) 473-2431

**HPC Official Use Only**

COA Received: \_\_\_\_\_

COA Approved: \_\_\_\_\_

COA Approved with Restriction: \_\_\_\_\_

COA Deferred for Further Info: \_\_\_\_\_

COA Denied: \_\_\_\_\_

**APPLICATION FOR CERTIFICATE OF APPROPRIATENESS**

**Project Information**

Property Address: \_\_\_\_\_

Property Use: \_\_\_\_\_

**Applicant Information**

Name: \_\_\_\_\_

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

City, State/Zip: \_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

**Type of Request (*Check all that may apply.*)**

- ☐ New Construction   ☐ Addition   ☐ Repair   ☐ Renovation   ☐ Demolition   ☐ Relocation  
☐ Replacement   ☐ Exterior brick painting   ☐ Sign(s)

**Proposed Feature to Change (*Check all that may apply.*)**

- ☐ Building   ☐ Facade   ☐ Sign(s)   ☐ Fence(s)   ☐ Sidewalk(s)   ☐ Driveway(s)   ☐ Parking Area(s)  
☐ Window(s)   ☐ Door(s)   ☐ Tree Removal   ☐ Landscaping   ☐ Painting of exterior brick  
☐ Roof   ☐ Awning

**Do You Intend to Apply for Tax Credits**

- ☐ Yes   ☐ No   ☐ Do Not Know

**Does applicant own the property?**

- ☐ Yes   ☐ No

If no, Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's City, State/Zip: \_\_\_\_\_

Owner's Phone Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

Owner's email address: \_\_\_\_\_

Owner's signature/date: \_\_\_\_\_

**Deadline:** This completed application *and* a sketch, drawing or images of the proposed change must be submitted to the city clerk at least twenty-four (24) hours prior to the next scheduled HPC meeting to be considered at that meeting.

**Note:** *Incomplete applications will not be reviewed by the HPC.*

Briefly describe the proposed project. Description of materials should be included. \_\_\_\_\_

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

**Application Representation:** The applicant or an authorized representative of the applicant must attend the HPC public meeting to support the application.

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