

**Downtown  
Architectural & Historic  
Board of Review**

Kenton City Building  
111 W. Franklin Street  
Kenton, OH 43326

**APPLICATION FOR ITEMS COVERED UNDER ORDINANCE NUMBER 88-005**

NAME _____	DBA _____
ADDRESS _____	ADDRESS _____
CITY, STATE ZIP _____	CITY, STATE ZIP _____
PHONE _____	PHONE _____

LOCATION OF PROJECT \_\_\_\_\_

I/we submit this application for the following reason. I/we understand a fee of \$5.00 must accompany this application.

PLEASE CHECK THE APPROPRIATE ITEM(S)

- |  |  |
|--|--|
| <input type="checkbox"/> Demolition (11)   | <input type="checkbox"/> Siding/Surface Treatment (20) |
| <input type="checkbox"/> Facade (12)   | <input type="checkbox"/> Windows and Doors (30)        |
| <input type="checkbox"/> Fence (13)  | <input type="checkbox"/> Signs (21-22)                 |
| <input type="checkbox"/> Parking and Landscaping (16)                                  | <input type="checkbox"/> New Construction (15-23)      |
| <input type="checkbox"/> Sidewalk/Streetscape Plan (24-29)                             | <input type="checkbox"/> Painting (19)                 |
| <input type="checkbox"/> Restoration/Rehabilitation (18-19)                            | <input type="checkbox"/> Other _____                   |
| <input type="checkbox"/> Awnings, Porches, Steps & Applied Architectural Features (17) |  |

Estimated Cost of Improvements: \$ \_\_\_\_\_

Work to be performed by \_\_\_\_\_

Estimated date of completion \_\_\_\_\_

*To help expedite your application, please submit any designs, sketches, prints, type of materials, etc. that will aid us in our process.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Action taken** (City use only)

Approved       Disapproved (explain on reverse side)       Referred to DHRB

Returned to applicant for more information      Date \_\_\_\_\_

By: \_\_\_\_\_ Date \_\_\_\_\_

Applicant Notified (date) \_\_\_\_\_ by  mail  phone  in person