

TOWN OF BREWSTER

OLD KING'S HIGHWAY REGIONAL HISTORIC DISTRICT HISTORIC DISTRICT COMMITTEE 2198 MAIN STREET BREWSTER MA 02631

PHONE: (508) 896-3701 EXT 1125 EMAIL: HDCMEETING@BREWSTER-MA.GOV

CERTIFICATION OF APPROPRIATENESS

PLEASE READ REVERSE SIDE FOR REQUIREMENTS
NOTE: ALL FEES DOUBLED IF WORK IS STARTED BEFORE OBTAINING APPROVAL

Address of Proposed Work			
Owner Name			Application #
Owner Mailing Address			- cc. +
Owner Email			Date Paid
Owner Email			Check #
Contractor Name			
Company Name			LOT
Contractor Address			
Contractor Email		Contractor Phone	
Please check the categories that a	pply:		
Exterior Building Construction	Building Type	Exterior Building	<u>Structure</u>
☐ New Building	House	☐ Paint	☐ Fence
☐ Addition	☐ Garage	☐ Solar Panels	☐ Wall
☐ Alteration	Commercial		☐ Shed
5.6.1.1	Other		☐ Other
Briefly describe proposed work (a	nd complete attached s	pecification sheet):	
	_	Applicant	Signature
This Certificate is hereby	=========		
This certificate is hereby		Date	



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SPECIFICATION SHEET PLEASE COMPLETE ONLY THOSE PORTIONS WHICH APPLY TO YOUR APPLICATION **Foundation** Type Amount Visible (NOT TO EXCEED BETWEEN 12" OR 18") Type_____ Amount Visible_____ Exposure____ Siding Color _____ Material_ Trim ALL WINDOWS & DOORS TO BE TRIMMED WITH ☐ 1x4 □ 1X5 Size of Corner Boards_____ Color____ Material _____ 1st Member _____ 2nd Member_____ Depth of Overhang Windows-MUST PROVIDE SPEC SHEET Type_____ Manufacturer Grilles or True Divide_____ Size____ Color____ Type_____ Manufacturer____ Skylights Size_____ Color____ Roof Type______ Pitch______ Color______ (7 PITCH MINIMUM) Color______ Color_______ Height to Ridge _____ Style____ Fencing- ALL STOCKADE TYPE FENCING MUST HAVE "GOOD" SIDE FACING OUT Type_____ Height Color Chimney Type_____ Size____ Color____ Material_____ Deck Color_____ Material____ Railing Material_____ Manufacturer____ Color_____ Material_____ Color_____ Garage Doors- MUST PROVIDE SPEC SHEET Size of Opening _____ Style_____ Material _____ Color ____ Manufacturer ____ **Gutters** Type_____ Color____ Material_____

BREWSTED OF BRIDE STATES OF SEE 15, 1833

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Storm Windows & Door-	MUST PROVIDE SPEC SHEET
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Туре	Color	Material	_
Entry Door (Front & S	Side)- <mark>MUST PROVIDE SPEC SHE</mark>	E <mark>T</mark>	
Туре	Color	Material	-
Attic/Roof Vent Type (Gable Louv	er, Ridge Vent, etc.)		
Landscaping Plans Please describe any Lanc	dscaping Plans		
Driveway			
Туре			
Type of Steps			
Exterior Fuel Tank Sc	reening		
Other			
IMPOPTANT: ALL EFEC DOUBLED IS WORK IS STAPTED REFORE ADDROVAL			

IMPORTANT: ALL FEES DOUBLED IS WORK IS STARTED BEFORE APPROVAL.

IF CERTIFICATE IS APPROVED, APPROVAL IS SUBJECT TO THE 10 DAY APPEAL PERIOD PROVIDED IN THE ACT.

This Certificate expires one year or upon the date of expiration of any Building Permit Issued, whichever expiration date shall be later. You must file an extension before the expiration date.

**The Homeowner, Agent or Contractor must attend the hearing, failure to do so may result in denial of the application*



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WAIVER OF 45 DAY DETERMINATION

OPTIONAL

The applicant/authorized agent understands and agrees that the determination of the submitted application for a Certificate of Appropriateness may not be made within 45 days of the filing of such application.

The applicant agrees to extend the time frame within which a determination is to be made as required by the Old King's Highway Regional Historic District Act.

Section 9- Meetings, Hearing, Time for Making Determinations

"As soon as convenient after such public hearing; but in any event within forty five (45) days after the filing of application, or within such further time as the applicant shall allow in writing, the committee shall make a determination on the application." (Page 11, Old King's Highway Regional Historic District Bulletin)

Applicant understands that the review of this application will be scheduled as soon as the situation allows.

Applicant/Authorized Agent Name	
Applicant/Authorized Agent Signature_	
Date	Property Location