



BOROUGH OF MECHANICSBURG

Application for Certificate of Appropriateness and HARB Review

_____ **Date of Application**

Check List: Your completed application should include:	
<input type="checkbox"/> Plot Plan Drawings	<input type="checkbox"/> Brochure or Catalog Cut
<input type="checkbox"/> Elevation Drawings	<input type="checkbox"/> Material Sample
<input type="checkbox"/> Photographs	<input type="checkbox"/> Other (specify): _____

PLEASE PRINT OR WRITE LEGIBLY

1. **Owner's Name:** _____
 If applicant is not the equitable owner of the property, indicate:
 Owner's Agent/Representative Other _____
 Letter Submitted by Property Owner, authorizing Agent/Representative to act: _____

Street Address: _____
 Mailing Address (if different): _____
 City: _____ State: _____ Zip: _____
 Phone (daytime): _____

2. **Street Address of Property to be Reviewed** (if different): _____

3. **Contractor's Name:** _____
 Street Address: _____
 Mailing Address (if different): _____
 City: _____ State: _____ Zip: _____
 Phone (daytime): _____

4. **Architect/Engineer** (if applicable): _____
 Street Address: _____
 Mailing Address (if different): _____
 City: _____ State: _____ Zip: _____
 Phone (daytime): _____

Applicant, complete back ↗

Official Use Only		
Date of HARB Review: _____	Date of Council Action: _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved with Conditions/Comments:	

<input type="checkbox"/> Denied	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Conceptual Review

11. Addition

Attach a site plan indicating lot lines, buildings, and placement of the proposed addition as well as elevations of the proposed addition in relation to the existing and adjacent buildings.

Proposed use _____
Proposed material(s) _____
Location relative to the main structure _____

12. New Construction

Attach a site plan indicating lot lines, buildings, parking, fences, setbacks, landscaping, etc. Also attach drawings of each elevation including a front view that includes existing adjacent buildings. Photographs of buildings adjacent to and directly across the street from the proposed new construction are also required.

Type of building is proposed: (e.g. residential, office, etc..) _____
Exterior finished materials: Front _____
Sides _____ Rear _____
* Note: complete other necessary sections of this application will include demolition, signs, fences, or screening.

13. Demolition

Attach photographs of the building to be demolished and those adjacent to and directly across the street from the proposed demolition site.

Type of building being demolished: (e.g. commercial, residential, etc..) _____
Reason for demolition _____
Future use of building site _____
* Note: complete other necessary sections of this application will include new construction, signs, fences, or screening.

14. Costs

Estimate the total cost of the alteration(s): _____

I, the undersigned, understand that any work affecting existing ordinances must be in compliance with those ordinances, that major work is subject to inspection, that new structures require a Certificate of Occupancy upon completion, that any misrepresentation of the proposed work is cause for withdrawal of the work permit, and any work beyond the scope of the work permit is cause for a Civil Action Complaint. The penalty as prescribed by section 10A-705 of the Mechanicsburg Historic District Ordinance is \$300.00 per day.

15. Signature of applicant: _____ **Date:** _____

16. Signature of Building Official: _____ **Date:** _____

Applicant was given:

Meeting Notice (provides applicant with date, time, and location of meeting at which application will be reviewed)

Official Use Only

Date of site visit: _____

Property Description (building inventory data sheet)

Historic Function: _____ Particular Type: _____ Current Function: _____

Architectural Style: _____

Exterior Materials: _____

Structural System: _____ Foundation: _____

Bays: _____ Stories: _____

Roof Pitch: _____ Roof Materials: _____ Roof/Wall Junction: _____

Dormers: _____ Chimney: _____

Porch: _____ Porch Support: _____

General Condition: _____ Integrity: _____

Field Notes: _____

Official Use Only: Record of Motion

I make a motion that HARB recommend that the Mechanicsburg Borough Council grant a COA to _____
_____ for _____

based on a finding of fact that _____

OR: I make a motion that HARB recommends that Mechanicsburg Borough Council not grant a COA to _____
_____ for _____

based on a finding of fact that _____

Motioned by _____ Seconded by _____ Vote: ____ Yes ____ No