

TOWN OF DOVER

Historic Preservation Commission

COUNTY OF MORRIS 37 North Sussex Street, Dover N.J. 07801 (973) 366-2200

CERTIFICATE OF HISTORIC REVIEW APPLICATION

Application No.: Date Filed: For: Certificate of Historic Review Board Board Advice to Board of Adjustment Board Meeting Date: Initial Escrow Deposit: Scheduled Meeting Date: Action: Approved Approved with Conditions Date Sent: APPLICANT Name: Email: Address: Email: Telephone Number: SUBJECT PROPERTY Location/Address: Block: Lot(s): PROPOSED WORK Demolition Addition New Construction Change in the Exterior Appearance Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): Façade Material Color Texture Describe: Awning Describe: Signage Signage		FOR TOWN USE ONLY	
Application Fees: Initial Escrow Deposit: Scheduled Meeting Date: Approved	pplication No.:	Date Filed	:
Scheduled Meeting Date:	or: ☐ Certificate of Historic Review	_	oard of Adjustment
Report to:	pplication Fees:	Initial Escrow Deposit:	
Address: Email:	cheduled Meeting Date:	Action: ■Approved ■Approved w	ith Conditions Denied
APPLICANT Name: Address: Bilock: Block: Bl	eport to: Planning Board I	oard of Adjustment Date Sent:	
Address: Email:	PPLICANT		
Address: Email:	Name:		
SUBJECT PROPERTY Location/Address: Block: Lot(s): PROPOSED WORK Demolition Addition New Construction Change in the Exterior Appearance Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): Façade Describe: Awning Describe: Signage	Address:	Email:	
Location/Address: Lot(s): Lot(s): PROPOSED WORK Demolition		Telephone Number:	
PROPOSED WORK Demolition Addition New Construction Change in the Exterior Appearance Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): Façade Material Color Texture Describe: Signage			
□ Demolition □ Addition □ New Construction □ Change in the Exterior Appearance Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): □ Façade □ Material □ Color □ Texture □ Describe: □ Awning □ Describe: □ Signage			
□ Demolition □ Addition □ New Construction □ Change in the Exterior Appearance Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): □ Façade □ Material □ Color □ Texture □ Describe: □ Awning □ Describe: □ Signage	POPOSED WORK		
Change in the Exterior Appearance Includes New (Add additional sheets if needed to fully describe): Façade			
☐ Façade ☐ Material ☐ Color ☐ Texture Describe: ———————————————————————————————————	☐ Demolition ☐ Addition	☐ New Construction ☐ Change in the Exterior A	Appearance
Describe: Window(s) Describe: Door(s) Describe: Lighting Describe: Roof Describe: Other Architectural Feature Describe:	□ Awning Describe: □ Signage Describe: □ Window(s) Describe: □ Door(s) Describe: □ Lighting Describe: □ Roof Describe: □ Other Architectural Feature		
PROPERTY OWNER	ROPERTY OWNER		
Property Owner is: Same as Applicant If property owner is other than the applicant, provide the following information on the property owner(s): Name of Property Owner: Address: Telephone Number:	Same as Applicant If property owner is other than the app Name of Property Owner: Address:	icant, provide the following information on the prope	

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CERTIFICATE OF HISTORIC REVIEW APPLICATION (cont.)

ZONING DISTRICT	S)	DEOLDENIT			
R-1 (Single-Far	mily) \square R-2 (S	<u>RESIDENTI</u> Single-Family) ☐R		R-4 (Multifamily Garden	Apt)
C-1 (Retail Con	nmercial)	NON-RESIDEN C-2 (General Commo IND/OP (Industrial/O	NTIAL ercial) ffice Park) ☐ R	C-3 (Commercial - Lt. Ind.) RAD (Redevelopment Area Di	istr.)
on the property?	erty contain restric		_	on by-laws, existing or proposition \square No	
DESCRIPTION OF AF	PLICATION				
Explain in detail the ex proposed use(s) of the			anges to be made	at the premises, including th	ne
SUBMITTALS					
List of Plan and other r	material being sul	omitted in support of ye	our application (at <i>No. of</i>	tach pages as needed):	
Title				s Prepared By	
Photographs Other:	☐ _{Material} Sar	nples Paint	Samples	Catalog Cuts	
• •	r Demolition shall th §236-96.8.C.	include additional Sub	omittals, Postings	and Published Notice in	
<u>OTHER</u>					
Would you like to be po (If "Yes", you will b		nmission Meeting? Meeting Time, Date & I	☐ Yes ☐ No Location)		
Applicant's Attorney					
(Required for Corporations) Te	Address —— lephone ——				
	Fax ——				
Other Professional					
Field of E	xpertise —— Address ——				
	lephone ——				
	Fax ——				

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CERTIFICATE OF HISTORIC REVIEW APPLICATION (cont.)

CERTIFICATIONS

Applicant's Certification

I certify that the foregoing statements and the materials submitted are true. I further certify that I am the individual applicant or that I am an Officer of the Corporate applicant and that I am authorized to sign the application for the corporation or that I am a general partner of the partnership applicant.

(If the applicant is a corporation this must be signed by an authorized corporate officer. If the applicant is a partnership, this must be signed by a general partner.)

day of	, 20	APPLICANT:
NOTARY PUBLIC		(Printed Name)
		(Signature of Applicant)
applicant to make this application and the the decision in the same manner as if I w am an Officer of the Corporate Owner an am a general partner of the partnership O	at I agree to be ere the applic d that I am au Dwner.	e subject of this application, and that I have authorized the e bound by this application, the representations made and ant. I further certify that I am the individual Owner or that athorized to sign the application for the Corporation or that orized corporate officer. If the applicant is a partnership, this must be
Sworn to and subscribed before me this day of	, 20	OWNER:
NOTARY PUBLIC		(Printed Name)
		(Signature of Applicant)
This Applicant and Owner hereby grant(s Agencies and or Commissions involved v	vith this applic	to members of the various Town Government Boards and cation to enter upon the subject premises for inspection and is either granted or denied.
This Applicant and Owner hereby grant(s Agencies and or Commissions involved v study pertaining to this application until th Sworn to and subscribed before me this	vith this applic ne application	cation to enter upon the subject premises for inspection an
This Applicant and Owner hereby grant(s Agencies and or Commissions involved v study pertaining to this application until th Sworn to and subscribed before me this day of	vith this applic ne application	cation to enter upon the subject premises for inspection an is either granted or denied.
This Applicant and Owner hereby grant(s Agencies and or Commissions involved v study pertaining to this application until th Sworn to and subscribed before me this day of	vith this applic ne application , 20	eation to enter upon the subject premises for inspection and is either granted or denied. OWNER:
This Applicant and Owner hereby grant(s Agencies and or Commissions involved w study pertaining to this application until the Sworn to and subscribed before me this day of NOTARY PUBLIC Sworn to and subscribed before me this day of	vith this applic ne application , 20	cation to enter upon the subject premises for inspection and is either granted or denied. OWNER: (Printed Name) (Signature of Applicant)
This Applicant and Owner hereby grant(s Agencies and or Commissions involved v study pertaining to this application until th Sworn to and subscribed before me this day of NOTARY PUBLIC Sworn to and subscribed before me this	vith this applic ne application , 20	cation to enter upon the subject premises for inspection and is either granted or denied. OWNER: (Printed Name) (Signature of Applicant) APPLICANT:
Agencies and or Commissions involved vistudy pertaining to this application until the Sworn to and subscribed before me this day of NOTARY PUBLIC Sworn to and subscribed before me this day of NOTARY PUBLIC NOTARY PUBLIC Escrow I understand that the sum of \$ accordance with the Code of the Town of the cost of professional services in the review of submitted materials. Sums	rith this application 1, 20—— 20—— 20—— The proper of	cation to enter upon the subject premises for inspection and is either granted or denied. OWNER: (Printed Name) (Signature of Applicant) APPLICANT: (Printed Name)

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