## Village Of Williamsville

**Building Department** 5565 Main Street Williamsville NY, 14221



Phone: 716-632-7747 Fax: 716-626-4964 www.walkablewilliamsville.com

## Historic Preservation Commission Application for Certificate of Appropriateness

Project Address:	Zo	oning:	SBL:		
This application concerns: ☐ a history	oric landmark 🗆 a histor	ic site [	□ a historic dist	rict	
Applicant:					
Name:		Phone:			
Address:		E-mail:	E-mail:		
Property Owner:					
Name:		Phone:			
Address:		E-mail:			
Application Representative:					
Name:		Phone:	Phone:		
Address:		E-mail:			
Application Checklist:					
☐ Eight (8) signed copies of this application, which should include:					
$\square$ a separate page detailing all proposed alteration, construction, and demolition					
$\square$ a separate page detailing any hardship that would result from the denial of this application					
☐ Eight (8) copies of all surveys, folded plans, drawings, and photographs depicting proposed changes to the historic landmark or site					
I certify that, to the best of my knowledge, the information supplied on this application is complete and accurate and that, if approved, the project described will be completed as stipulated in this application.					
Applicant Signature:	pplicant Signature: Date:				
Official Use Only:					
Received By:	Application is Comp	lete: [	□ yes	□ no	
Date Received:	ZBA Variance Requi	red:	□ yes	□ no	
Date Forwarded to HPC:	Date Approved:	Dat	te Denied:		