

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

Official Use Only

Received By: _____	Application is Complete: <input type="checkbox"/> yes <input type="checkbox"/> no
Date Received: _____	ZBA Variance Required: <input type="checkbox"/> yes <input type="checkbox"/> no
Fee Received: _____	(Commercial \$100 / Residential \$0)
Date Forwarded to HPC: _____	Date Approved: _____ Date Denied: _____

Project Address: _____ Zoning: _____ SBL: _____

This application concerns: a historic landmark a historic site a historic district

Applicant:

Name: _____	Phone: _____
Address: _____	E-mail: _____

Property Owner:

Name: _____	Phone: _____
Address: _____	E-mail: _____

Application Representative:

Name: _____	Phone: _____
Address: _____	E-mail: _____

Proposed Change: _____

What hardship, if any, might you incur if work is not allowed? _____

**Please include a separate paper describing in detail all the proposed alterations, modifications, or changes and supply floor plans, sections and/or elevations. Please attach all supplemental materials to this application as well as supply a digital copy of all files. 8 Copies of all materials are required to be submitted to the Building Department for review.*

I certify that, to the best of my knowledge, the information supplied on this application is complete and accurate and that the project described will be completed as stipulated in this request.

Signature of Applicant: _____ Date: _____