CLIFTON ARCHITECTURAL REVIEW BOARD TOWN OF CLIFTON, VIRGINIA

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

DATE OF APPLICATION:	
NAME OF APPLICANT OR AGENT:	
ADDRESS:	
TELEPHONE: (day) (evening	ng)
LOCATION OF PROPERTY INCLUDING STREET ADDRESS	SS AND TAX MAP NUMBER:
GENERAL DESCRIPTION OF PROPOSAL:	
ATTACHMENTS: □ APPLICATION FEE* □ SEVEN (7) COPIES OF APPLICATION WITH PLATS, APPLANS, ETC.	
I UNDERSTAND THAT ALL SUBMISSION REQUIREMEN' WILL REVIEW AN APPLICATION	TS MUST BE MET BEFORE THE ARB
SIGNATURE OF APPLICANT OR AGENT	DATE
CERTIFICATE ISSUED: YES \square N (When marked "YES" and signed, this document becomes the "	NO □ Certificate of Appropriateness")
BY:CHAIRMAN, ARB	DATE
ARB MEMBERS' INITIALS:	
CONDITIONS:	
IF CERTIFICATE IS NOT TO BE ISSUED, THE ARB SHALI BELOW:	L STATE THE BOARD'S REASON

*Application fee: \$10.00 payable to the Town of Clifton except new home or commercial construction shall be \$250.00 and any6 actual costs of review fees incurred, including consultant's fees and other costs set forth in Virginia State Code Section 15.2-2286.A.6.

Signed Certificate of Appropriateness does \underline{not} constitute a Building Permit or authorization to proceed with any construction.