

CITY OF GENEVA  
CERTIFICATE OF APPROPRIATENESS  
DOWNTOWN DESIGN DISTRICT

Address of Building / property: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Building / property owner: \_\_\_\_\_

Business name: \_\_\_\_\_

Cost of improvement \_\_\_\_\_

Improvement type: \_\_\_ Facade \_\_\_ Awning \_\_\_ New Cons. \_\_\_ Sign \_\_\_ Paint

Other \_\_\_\_\_

Approximate age of building: \_\_\_\_\_ Architectural type \_\_\_\_\_

\_\_\_ I have read / reviewed - Zoning Code Chapter 1272.07 "Downtown Design District"

\_\_\_ I have read / reviewed - the "Secretary of the Interiors Design Standards"

\_\_\_ I have read / reviewed - "Geneva: renovation through preservation"

Applicant shall submit the following:

Scaled drawings of improvement;

Photo of building (or area to be improved);

Color samples and/or materials proposed.

Other information as deemed necessary by the board:

Briefly Describe Method of Improvement: \_\_\_\_\_

Applications must be submitted in full 14 days before the architectural review board meeting.

**Applicant shall complete: Answer yes or no**

\_\_\_ is the improvement compatible with the building / structure, property and/or environment?

\_\_\_ Will improvement preserve or enhance the building architecture?

\_\_\_ Will improvement respect the period building was erected?

\_\_\_ Does improvement respect changes made over time to the building / structure and/or site?

\_\_\_ is improvement sensitive to building and/or site characteristics?

\_\_\_ does the improvement impact, repair and/or replace missing or deteriorated architectural features?

\_\_\_ Are additions compatible with the building Architectural, Historical and/or cultural materials?

\_\_\_ is addition design compatible with downtown design district environment?

\_\_\_ Does or will the proposed improvement impact any archeological resources?

I certify that the information contained in this application and its supplements is true and correct

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**For Official Use Only:**

Date application received: \_\_\_\_\_

Date of meeting: \_\_\_\_\_

Board Decision and Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Vote:** For \_\_\_ Against \_\_\_ Unanimous \_\_\_ Approved \_\_\_ Denied \_\_\_

\_\_\_\_\_

**Chairman**

\_\_\_\_\_

**Secretary**