### HISTORICAL ARCHITECTURAL REVIEW BOARD

#### **EIGHT-STEP APPLICATION PROCESS**

- 1. Obtain a copy of the Application Package at the City of York Bureau of Permits & Inspections at 101 South George Street, First Floor, York, PA 17401. Office hours are Monday Friday 8:00 am 5:00 pm (except for designated holidays). The telephone number is 717-849-2256.
- 2. Talk with your architect or contractor about how the project should meet HARB requirements. If needed, request a meeting with the HARB Consultant or schedule a preliminary review with HARB. An informal discussion of your project may be scheduled after other reviews.
- 3. Review the checklist in the application. Determine what materials you will need to submit with the Certificate of Appropriateness application. Drawings, photographs, material specification sheets, and other related items are REQUIRED as part of the submission. Please see the attached Submission Checklist for required items. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.
- **4. Submit one copy** of the completed application form to the City of York Bureau of Permits & Inspections at 101 South George Street, First Floor, York, PA 17401. There is no fee for a Certificate of Appropriateness application.
- 5. Attend the HARB meeting. The building owner or designated representative must attend the meeting to present the application. The representative may be a business tenant, Realtor, sign or awing company representative, contractor, architect, engineer, or other responsible party approved by the owner. The Historical Architectural Review Board will discuss the application and details of the work. They may recommend approval as presented, approval with conditions, denial, or they may table the application. Subsequent changes or additions to the application must be submitted for review at a future HARB meeting.
- **6. HARB's** recommendation is forwarded to City Council for their next scheduled meeting. City Council meetings are held the first and third Tuesdays of every month in City Council Chambers.
- 7. Upon approval by City Council, a Certificate of Appropriateness may be issued immediately, provided all required conditions have been met. A building permit may be obtained from the City of York Bureau of Permits & Inspections if the applicant has complied with all other pertinent City codes.
- **8. Inspections** of the work as per the Building Codes and are required by the approved permit, as well as a Final Inspection to verify compliance with the Building Codes and the Certificate of Appropriateness.

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#### SUBMISSION CHECKLIST

- □ Completed HARB Application
   □ Supporting Documentation
   □ Photos of existing conditions (REQUIRED)
   □ Sheet with proposed/ new material specifications (REQUIRED)
   Material/ brand/ model number/ etc.
  - Images of materials (optional)
  - ☐ Digital and hard copy of drawings (if needed to help clarify proposal)

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HARB Application for a Certificate of Appropriateness

**INSTRUCTIONS:** All applicants must complete Sections 1 through 7 and sign. Please print legibly and complete all sections that relate to your proposed work. All applications **MUST** include photographs of building elevations visible from the public ways and other relevant supporting materials, such as indicated throughout this application or as requested by City Staff and/ or the HARB Consultant. Applications **CANNOT BE PROCESSED** without thorough explanations and adequate supporting materials. Applications without supporting documentation will be returned and not processed.

Detailed documentation MUST accompany the application. Applications must be received by the City of York Bureau of Permits & Inspections at 101 South George Street, First Floor, York, PA 17401 at least eight (8) calendar days prior to the next scheduled HARB meeting. Call P&I at 717-849-2256 with any questions regarding this form or the HARB process.

1. PROJECT STREET ADD	RESS:			
2. APPLICANT INFORMAT				
Name:	Emai	l:		
Address:	Phone:			
City:	State:	Zip:	Fax:	
3. OWNER INFORMATION	: (if different from Applicant)			
Name:	Emai	l:		
Address:		Phone:		
City:	State:	Zip:	Fax:	
4. CONTRACTOR/ DEVELO	OPER/ DESIGN PROFESSION	ONAL OF RECOR	D:	
Contact:	Em	ail:		
Company Name:		Title:		
Address:		Phone:		
City:	State:	Zip:	Fax:	

The Honorable Michael Ray Helfrich, Mayor

A144:/ D 1 1 111 4	Additions	New Construction
Alterations/ Rehabilitation:		
Doors	Porch/Stoop/Stairs/Railings	Windows
Exterior Cleaning	Roof/Chimney/Cornice	Walls/Siding
Masonry/Re-pointing	Storefront	
Paint/Finishes	Walls/Gates/Fences	
Repair/ Replacement:		
Doors	Porch/Stoop/Stairs/Railings	Windows
Exterior Cleaning	Roof/Chimney/Cornice	Walls/Siding
Masonry/Re-pointing	Storefront	
Paint/Finishes	Walls/Gates/Fences	
Signs/ Awnings/ Lighting:		
New Sign	New Awning/Canopy	Sign Illumination
Existing Sign	Existing Awning/Canopy	Building Lighting
Repair	Repair	Street/Area Lighting
Replace	Replace	
Rehabilitate	Rehabilitate	
Building Relocation/Demolition	/Other:	
Relocation – Indicate N	New Location	
Demolition – Indicate 1	New Proposed Use at Site	
Other – Describe Belov		
	CRIPTION OF THE PROPOSED WORK. In , and locations:	
	an arrasis n. carrasnan	
	RB SHOULD CONSIDER:	
By my/ our signatures hereon, I/ w legal owner(s) and that I/ we agree work. I/ we understand that false o criminal penalties, and/ or revocati	re hereby certify that the designated work on the to comply with all applicable laws, ordinances, or misleading information herein could result in coun of permits issued pursuant to the proposed w	subject property is authorized and regulations pertaining to denial of the application, civil tork.
By my/ our signatures hereon, I/ w legal owner(s) and that I/ we agree work. I/ we understand that false o criminal penalties, and/ or revocati	re hereby certify that the designated work on the to comply with all applicable laws, ordinances, or misleading information herein could result in o	subject property is authoriz and regulations pertaining denial of the application, civ

The Honorable Michael Ray Helfrich, Mayor

### **FOR OFFICIAL USE ONLY**

HARB ACTION MEETING	MEETING DATE:	
Recommend Approval as Presented		
Recommend Approval with Conditions		
Recommend Denial Vote: For Against R	Recused	
Tabled Reason		
Comments:		
ACTION OF CITY COUNCIL COUNCIL MEETIN	NG DATE:	
Approved DeniedTabled		
Comments:	<del></del>	
RECORD OF EVENTS		
1. P&I received application for C of A	Date:	
2. HARB reviewed application for C of A	Date:	
or HARB consultant provided Staff Review		
3. CITY COUNCIL	D /	
Received Recommendation from HARB  Council Macting Approval of C of A	Date:	
<ul><li>Council Meeting Approval of C of A</li><li>Council Meeting Denial of C of A</li></ul>	Date:	
<ul> <li>Letter/ C of A to Applicant</li> </ul>	Date: Date:	
4. BUILDING CODE OFFICIAL	<u> </u>	
Building Permit Issued: Permit #:		
Building Permit Revoked Issuing Inspection	ector:	
Final Inspection by:	Date:	
• Verification of proper application of C of A by:	Date:	
Refer to Permits & Inspections for a record of inspections perfo	•	
FINAL COMMENTS (attach additional sheets as necessary):		

### HISTORICAL ARCHITECTURAL REVIEW BOARD

### **HISTORIC YORK MAP**

