

**Downtown
Architectural & Historic
Board of Review**

Kenton City Building
111 W. Franklin Street
Kenton, OH 43326

APPLICATION FOR ITEMS COVERED UNDER ORDINANCE NUMBER 88-005

NAME _____	DBA _____
ADDRESS _____	ADDRESS _____
CITY, STATE ZIP _____	CITY, STATE ZIP _____
PHONE _____	PHONE _____

LOCATION OF PROJECT _____

I/we submit this application for the following reason. I/we understand a fee of \$5.00 must accompany this application.

PLEASE CHECK THE APPROPRIATE ITEM(S)

- | | |
|--|--|
| <input type="checkbox"/> Demolition (11) | <input type="checkbox"/> Siding/Surface Treatment (20) |
| <input type="checkbox"/> Facade (12) | <input type="checkbox"/> Windows and Doors (30) |
| <input type="checkbox"/> Fence (13) | <input type="checkbox"/> Signs (21-22) |
| <input type="checkbox"/> Parking and Landscaping (16) | <input type="checkbox"/> New Construction (15-23) |
| <input type="checkbox"/> Sidewalk/Streetscape Plan (24-29) | <input type="checkbox"/> Painting (19) |
| <input type="checkbox"/> Restoration/Rehabilitation (18-19) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Awnings, Porches, Steps & Applied Architectural Features (17) | |

Estimated Cost of Improvements: \$ _____

Work to be performed by _____

Estimated date of completion _____

To help expedite your application, please submit any designs, sketches, prints, type of materials, etc. that will aid us in our process.

Applicant's Signature _____ Date _____

Action taken (City use only)

Approved Disapproved (explain on reverse side) Referred to DHRB

Returned to applicant for more information Date _____

By: _____ Date _____

Applicant Notified (date) _____ by mail phone in person