



APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS  
CITY OF GREENFIELD  
HISTORIC BOARD OF REVIEW

Date Filed \_\_\_\_\_

Docket # HBR \_\_\_\_\_

**A Certificate of Appropriateness shall be obtained before commencing any new construction, alteration, restoration, rehabilitation, change of use, moving or demolition on any site, or structure, landscaping, or any signage associated with any use that is in the bounds of the Greenfield Historic District.**

**1. Premises Affected**

Address of Property Affected) \_\_\_\_\_

Key Parcel # \_\_\_\_\_

Attach or enter legal description \_\_\_\_\_

Present Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

Check one (or more) of the following:

New Construction \_\_\_\_\_

Restoration \_\_\_\_\_

Demolition \_\_\_\_\_

Change of Use \_\_\_\_\_

Moving \_\_\_\_\_

Landscaping \_\_\_\_\_

Rehabilitation \_\_\_\_\_

Alteration \_\_\_\_\_

Sign \_\_\_\_\_

**A Detailed Description of the Proposed Changes or Construction Must Accompany This Application (Use Extra Pages)**

**Documentation Required:**

Site Plan \_\_\_\_\_ Photographs \_\_\_\_\_ Building Plans \_\_\_\_\_ Samples \_\_\_\_\_ Drawings \_\_\_\_\_ Other \_\_\_\_\_

**2. Applicant Info**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone, Fax, E-Mail \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

**Applicant is** (circle one): Sole owner Joint Owner Tenant Agent Other (specify)

\_\_\_\_\_

Architect's/Engineer's/Contractor's Name \_\_\_\_\_ Telephone \_\_\_\_\_

Architect's/Engineer's/Contractor's Address \_\_\_\_\_ Email: \_\_\_\_\_

**3. Property Owner**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone, Fax, E-Mail \_\_\_\_\_

**Signature of Owner** \_\_\_\_\_

City of Greenfield, Planning Department 10 S. State Street, Greenfield, IN 46140

Phone: 317-477-4320

Fax: 317-477-4321

E-mail: [planning@greenfieldin.org](mailto:planning@greenfieldin.org)

[www.greenfieldin.org](http://www.greenfieldin.org)



# NOTICE OF PUBLIC HEARING

**THERE WILL BE A PUBLIC HEARING OF  
THE HISTORIC BOARD OF REVIEW  
ON**

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**(Date and Time)**

**IN CITY HALL COUNCIL CHAMBERS  
REGARDING THE PROPERTY LOCATED  
AT** \_\_\_\_\_

**(Address)**

**FOR** \_\_\_\_\_

**(Nature of Request)**

**Signed** \_\_\_\_\_

**(Secretary, Historic Board of Review)**