

**EL DORADO HISTORIC DISTRICT COMMISSION
APPLICATION FOR A
CERTIFICATE OF APPROPRIATENESS**

Date _____

PROPERTY

Historic Name _____

Address _____

OWNER

Name _____

Address _____

Phone _____

PERSON FILING APPLICATION, IF OTHER THAN OWNER

Name _____ Phone _____

Relationship to Applicant _____

Address _____

PROPOSED WORK

ATTACH ADDITIONAL PAGES IF NECCESARRY. INCLUDE ANY DRAWINGS, PLANS, SAMPLES, OR OTHER MATERIALS THAT DESRIBE YOUR PROJECT.

Dates of Construction Activity _____

El Dorado Historic District Commission Application for a Certificate of Appropriateness – 2nd Page

PROJECT ARCHITECT/ENGINEER

Name _____

Address _____

Phone _____

STAFF USE ONLY

Application _____ Approved _____ Denied _____ Date _____

Conditions _____

Comments _____



File/HDC/COA/11-4-04