

City of Maysville
216 Bridge Street Maysville, KY 41056
606-564-9419 606-564-9416
www.cityofmaysville.com

Application for a CERTIFICATE OF APPROPRIATENESS
From Maysville/Washington Board of Architectural Review

Property Address: _____

Property Owner: _____ Phone #: _____

Property Owner Address: _____

Applicant Name (if not owner): _____ Phone #: _____

Contractor Name: _____ Phone #: _____

Contractor Address: _____

Nature of Work: minor alteration new construction addition sign

 canopy/awning repair/maintenance demolition

Building Use: residential commercial other _____

Proposed Starting Date: _____ Completion Date: _____ Estimated Cost: _____

Describe in detail the proposed work to be done, including the type of materials to be used, methods, or any information which may be useful for review purposes. Attach any photographs, drawings, plans, or other information to assist the board in reviewing your proposal.

HAS THE PROPOSED WORK ALREADY STARTED OR COMPLETED? Yes No
If "yes," state the reason(s) why work has begun or completed without board approval.

APPLICANT SIGNATURE: _____ DATE: _____

OWNER SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY: Date Received: _____ Date Reviewed: _____

 approved as submitted approved w/conditions or changes denied

Date CA issued: _____ CA#: _____