

Application to
WEST TISBURY HISTORIC DISTRICT COMMISSION

*Instructions: Submit application and exhibits in three complete sets. **Please be sure to notify Sean Conley, Chair that you have left an application at Town Hall by leaving a telephone message at 508 693 6677, or speaking to him directly.***

Check type of Certificate applied for:

- :
- CERTIFICATE OF APPROPRIATENESS for work as described and exhibits filed.
- CERTIFICATE OF NON-APPLICABILITY for the following reasons:

- Not visible from any public street, public way, public park, or public body of water.
- Reconstruction similar to original following fire or other disaster.
- Maintenance, repair or replacement, using same design, materials, colors.
- Proposed work, materials and colors exempted from review by the Commission.
- Meeting requirements certified by authorized public officer to be necessary for public safety because of unsafe condition.
- Other.

CERTIFICATE OF HARDSHIP for a determination as to whether owing to conditions especially affecting the building or structure involved, but not affecting the historic district generally, failure to approve an application will involve a substantial hardship to the applicant, and as to whether such application may be approved without substantial detriment to the public welfare, and without substantial derogation from the intent of the WTHD By-Law.

LOCATION of work _____ Assessor's Map _____ Lot _____

OWNER _____ Telephone _____

ADDRESS _____

APPLICANT _____ Telephone _____

ADDRESS _____

CONTRACTOR _____ Telephone _____

ADDRESS _____

DESCRIPTION OF ALL PROPOSED EXTERIOR WORK:

LIST EXHIBITS: Drawings, specifications, photographs, materials and colors attached to application.

CHECKLIST:

- ___ site plans showing existing structures and proposed changes
- ___ photographs of existing conditions
- ___ list of materials and /or color samples / catalog cuts
- ___ scaled architectural drawings of proposed work if required

Signatures (*both are required*)

Applicant Date

Owner Date

Incomplete applications will be returned.

Received by WTHDC: Date _____ By _____