

# HISTORIC DISTRICT COMMISSION CERTIFICATE OF APPROPRIATENESS APPLICATION

## Applicant Information

Name of Applicant: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Legal Interest:  Property Owner     Lessee/Tenant  
 Purchaser by Option, Purchase Agreement, or Land Contract

## Owner Information ( Same as Applicant)

Owner of Record: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Agent Information

Name of Agent: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Zoning Information

Parcel Address: \_\_\_\_\_ Parcel ID No: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Current Legal Use: \_\_\_\_\_

## Fire Safety Certification (required)

I certify that the property where work will be undertaken has, or will have before the proposed project completion date, a fire alarm system or a smoke alarm complying with the requirements of the Stille-DeRossett-Hale single state construction code act, 1972 PA 230, MCL 125.1501 to 125.1531

### Staff Use Only

Case No: \_\_\_\_\_

Materials Rec'd: \_\_\_\_\_

Receipt No: \_\_\_\_\_

Residential (\$20)

Non-Residential (\$50)

Mtg. Date: \_\_\_\_\_

Action: \_\_\_\_\_

### Property Owner and Authorized Agent Affidavits

See Page 5 for the Property Owner Affidavit, this must be completed when the applicant is not the property owner of record.

See Page 6 for the Authorized Agent Affidavit, this must be completed for any person(s) acting on applicant's behalf.





# HISTORIC DISTRICT COMMISSION CERTIFICATE OF APPROPRIATENESS APPLICATION

## Required Information for Submittal

- This application with complete information, neatly written, and signed by all applicable parties.
- Application fee payment. (Check, Cash, Card, Online – Confirm with staff)
- Complete responses to all Project Information prompts.
- Proof of Ownership
  - Deed, Purchase Agreement, Option, Land Contract, etc.
  - Notarized Authorized Agent Authorization Form (if applicable)
- Detailed drawings for new construction, additions, or structural changes. (if applicable)
  - Must be signed and sealed by an engineer, architect, or surveyor licensed by the State of Michigan if the request is for any structure other than a single or two-family home.
  - Nine (9) hard copies and one (1) digital copy.
- Plot Plan (if applicable)
  - Drawn layout of the property including buildings, fencing, walkways, driveways, and/or any other pertinent information. May be completed by the applicant so long as the drawing is neat and legible.
- Pictures of the structure and of objects to be altered, replaced, restored, etc.
- Pictures of all proposed materials and products.

## Additional Information for Submittal

- Property History
  - Narrative of the history of the property, including a timeline of previous uses, previous development approvals, ownership history, etc.
  - Past photos, if available.
- Any other information pertaining to the requested Certificate of Appropriateness that may be helpful for review.

In the course of reviewing the application, the Zoning Coordinator may request additional information from the applicant, where the information is necessary to complete the review.



# HISTORIC DISTRICT COMMISSION CERTIFICATE OF APPROPRIATENESS APPLICATION

## Applicant Confirmation

The applicant must read the following statement carefully and sign below:

The undersigned requests that the City of Flint review this application and related required documents and plans as provided in Chapter 2 of the City of Flint Code of Ordinances. The applicant affirms and acknowledges the following:

- That the applicant has a legal interest in the property described in this application.
- That the answers, statements, and documents contained in this application and enclosures are in all respects true and correct to the best of their knowledge.
- That the approval of this application does not relieve the undersigned from compliance with all other provisions of the Zoning Ordinance or other codes or statutes.
- That the applicant will comply with any and all conditions imposed in granting an approval of this request.
- That any decision of the Commission favorable to the applicant will remain valid only as long as the information or data relating thereto are found to be correct and the conditions upon which the decision was based are maintained.
- If also the owner, the applicant grants the City of Flint staff and the Historic District Commission the right to access the subject property for the sole purpose of evaluating the application.

\_\_\_\_\_  
Applicant Name (printed)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## Owner Confirmation ( Not applicable)

If the applicant is not the property owner, the owner must read the following statement carefully and sign below:

The undersigned affirms and acknowledges they are the owner(s) of the property described in this application, and:

- Is/are aware of the contents of this application and related enclosures.
- Authorizes the applicant and their agent, if applicable, to submit this application and represent the undersigned in the matter being reviewed by the City of Flint.
- Grants the City of Flint staff and the Historic District Commission the right to access the subject property for the sole purpose of evaluating the application.

\_\_\_\_\_  
Property Owner Name(s) (printed)

\_\_\_\_\_  
Property Owner Signature(s)

\_\_\_\_\_  
Date



# HISTORIC DISTRICT COMMISSION PROPERTY OWNER AFFIDAVIT

( Not applicable)

State of Michigan }  
County of Genesee } ss.

I (we) \_\_\_\_\_, after being first duly sworn, depose and say:  
Property Owner Name(s) (printed)

1. That I/we are the owner(s) of real estate located at \_\_\_\_\_.  
Street Address and Parcel Identification Number (PID)
2. That I/we have read and examined the application, and are familiar with its contents.
3. That I/we have no objection to, and consent to such request as set forth in the application.
4. Such request being made by the applicant ( is) ( is not) a condition to the sale or lease of the above referenced property.

\_\_\_\_\_  
Property Owner Signature(s)

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

\_\_\_\_\_  
Notary Name (printed)

\_\_\_\_\_, Notary Public  
Notary Signature

My commission expires: \_\_\_\_\_

County of Residence: \_\_\_\_\_



# HISTORIC DISTRICT COMMISSION AUTHORIZED AGENT AFFIDAVIT

(  Not applicable)

State of Michigan }  
County of Genesee } ss.

I (we) \_\_\_\_\_, after being first duly sworn, depose and say:  
Applicant Name (printed)

1. That all statements herein contained and the information provided in the attached application, plans, and other exhibits are in all respects true and correct to the best of my knowledge.
2. That I hereby authorize the following people to represent my interests regarding this application and to appear on my behalf before any administrative or legislative body in the City considering this application and to act in all respects as our agent in matters pertaining to the attached application.

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Applicant Signature

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ Year.  
Day Month Year

\_\_\_\_\_  
Notary Name (printed)

\_\_\_\_\_, Notary Public  
Notary Signature

My commission expires: \_\_\_\_\_

County of Residence: \_\_\_\_\_



# HISTORIC DISTRICT COMMISSION CERTIFICATE OF APPROPRIATENESS APPLICATION PROCESS

CERTIFICATE OF APPROPRIATENESS APPLICATION PROCESS	
Step 1	<ul style="list-style-type: none"> <li>Applicant(s) meets with Zoning staff to discuss the project.</li> </ul>
Step 2	<ul style="list-style-type: none"> <li>Applicant(s) submits a complete application with all supporting materials.</li> </ul>
Step 3	<ul style="list-style-type: none"> <li>Staff reviews the application for completeness. (5 business days)</li> <li>If there are any incomplete items, staff sends a response to the applicant(s) indicating deficient materials.</li> </ul>
Step 4	<ul style="list-style-type: none"> <li>Staff places the application on the next available meeting agenda.</li> </ul>
Step 5	<ul style="list-style-type: none"> <li>Staff sends the materials to the HDC and applicant(s) prior to the meeting date.</li> </ul>
Step 6	<ul style="list-style-type: none"> <li>Applicant attends the meeting.</li> <li>The Historic District Commission votes to approve, approve with conditions, deny, or table the request for another date.</li> </ul>

## Submission

Completed applications may be submitted via email, mail, or drop-off.

Email: [cof-zoning@cityofflint.com](mailto:cof-zoning@cityofflint.com)  
Phone: (810) 766-7426

Address: Flint City Hall, Zoning Division  
1101 S. Saginaw St.  
Flint, MI 48502

Please submit applications well in advance of any dates of work for proposed projects. Work cannot begin until all applicable HDC, Zoning, and Building Permits are obtained.

Certificate of Appropriateness approval is valid for one year from the date of approval. If a building permit is issued within a year of the variance approval, but the building is not completed before expiration of the building permit and the permit is not extended, the Certificate of Appropriateness shall expire.

An applicant aggrieved by a decision of the Historic District Commission concerning a permit application may file an appeal with the State Historic Preservation Review Board within sixty (60) days of the decision. Any citizen or duly organized historic preservation organization in the local unit, as well as resource property owners, jointly or severally aggrieved by a decision of the Historic District Commission may appeal the decision to the circuit court.

