



# CITY OF DRIPPING SPRINGS

PHYSICAL: 511 Mercer Street • MAILING: PO Box 384

Dripping Springs, TX 78620

• 512.858.4725 • [www.cityofdrippingsprings.com](http://www.cityofdrippingsprings.com)

## CERTIFICATE OF APPROPRIATENESS APPLICATION

District Located or Landmark:  Mercer Street  Old Fitzhugh Road  Hays Street

Individual Landmark (Not in an Historic District)

### CONTACT INFORMATION

APPLICANT NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PROPERTY OWNER NAME (if different than Applicant): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### PROJECT INFORMATION

Address of Property (Structure/Site Location): \_\_\_\_\_

Zoning Classification of Property: \_\_\_\_\_

Description of Proposed Use of Property/ Proposed Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of How Proposed Work will be in Character with Architectural and/or Historical Aspect of Structure/Site and the Applicable Zoning Requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Cost of Proposed Work: \_\_\_\_\_

Intended Start Date of Work: \_\_\_\_\_ Intended Completion Date of Work: \_\_\_\_\_

**CERTIFICATE OF APPROPRIATENESS SUBMITTAL CHECKLIST**

<b>CHECKLIST</b>		
<b>Staff</b>	<b>Applicant</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Current photograph of the property and adjacent properties (view from street/right-of-way)
<input type="checkbox"/>	<input type="checkbox"/>	Concept Site Plan: A drawing of the overall conceptual layout of a proposed development, superimposed upon a topographic map or aerial photo which generally shows the anticipated plan of development
<input type="checkbox"/>	<input type="checkbox"/>	Elevation drawings/sketches of the proposed changes to the structure/site
<input type="checkbox"/>	<input type="checkbox"/>	Samples of materials to be used
<input type="checkbox"/>	<input type="checkbox"/>	Color chips of the colors which will be used on the structure <i>(if applicable)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Sign Permit Application <i>(if applicable)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Building Permit Application <i>(if applicable)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Application for alternative exterior design standards and approach <i>(if applicable)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Supplemental Design Information <i>(as applicable)</i>
<input type="checkbox"/>	<input type="checkbox"/>	Billing Contact Form
<input type="checkbox"/>	<input type="checkbox"/>	Proof of Ownership-Tax Certificate or Deed

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
Date

\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER AUTHORIZING THE WORK

\_\_\_\_\_  
Date

\*\*\*\*\*TO BE FILLED OUT BY CITY STAFF\*\*\*\*\*

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Project Eligible for Expedited Process:  Yes  No

Action Taken by Historic Preservation Officer:  Approved  Denied

Approved with the following Modifications: \_\_\_\_\_

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\_\_\_\_\_  
**SIGNATURE OF HISTORIC PRESERVATION OFFICER**

\_\_\_\_\_  
**DATE**

Date Considered by Historic Preservation Commission (if required): \_\_\_\_\_

Approved  Denied

Approved with the following Modifications: \_\_\_\_\_

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Historic Preservation Commission Decision Appealed by Applicant:  Yes  No

Date Appeal Considered by Planning & Zoning Commission (if required): \_\_\_\_\_

Approved  Denied

Approved with the following Modifications: \_\_\_\_\_

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Planning & Zoning Commission Decision Appealed by Applicant:  Yes  No

Date Appeal Considered by City Council (if required): \_\_\_\_\_

Approved  Denied

Approved with the following Modifications: \_\_\_\_\_

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**Submit this application to City Hall at 511 Mercer St. /P.O. Box 384, Dripping Springs, TX 78620. Call City Hall at (512)858-4725 if you have questions regarding this application.**