CITY OF PULLMAN, 190 SE CRESTVIEW ST., BLDG. A, PULLMAN, WA 99163

INFORMATION REQUIRED WHEN APPLYING FOR A CERTIFICATE OF ALTERATION

APPLICATION

A complete application must be filed with the Planning Department in sufficient time to allow for staff to review the application before scheduling the required meeting of the Historic Preservation Commission. An application will not be accepted until complete, as determined by the Planning Department. A complete application must include:

- 1. Application Form.
- 2. <u>Proof of Ownership/Permission from Owner</u>. The applicant must submit proof of ownership of the property for which the Certificate of Alteration is requested. All owners must join in or be represented in the application. If the applicant is not the owner of the property, written consent must be submitted by the owner granting the applicant permission to act as his or her agent.
- 3. <u>Legal Description</u>. The legal description for the property involved in the application must be provided.
- 4. <u>Photographs</u>. The applicant must provide comprehensive exterior and interior photographs of the property to depict existing conditions at the site.
- 5. <u>Plot Plan</u>. If the proposal involves alterations to the exterior dimensions of any structure on the property, a scaled drawing is required that shows the proposed layout of site development, including the following:
 - a. dimensions and orientation of the property;
 - b. location and dimensions, including heights, of existing and proposed structures;
 - c. location and layout of parking and loading areas, access points, pedestrian walkways, and landscaping.
- Architectural Plans. The applicant must submit architectural plans or other legible drawings, drawn
 to scale, depicting the proposed alteration activity, including a description of existing and proposed
 building materials and colors.

FEES

Application for Certificate of Alteration Fee.....\$ 150.00

ASSISTANCE

The Planning Department is available to answer any questions about an application by phoning (509) 338-3220.

RECEIPT NO.:_	
DATE APPLICATION RECEIVED:	
DATE APPLICATION ACCEPTED AS COMPLETE:	

CITY OF PULLMAN CERTIFICATE OF ALTERATION APPLICATION

Pullman City Code 16.60.060		
APPLICANT:		
NAME:		
ADDRESS:		
EMAIL ADDRESS:		
TELEPHONE:		
STATUS (property owner, lessee, agent, purchase	r, etc.):	
PROPERTY OWNER (if different than applicant):		
NAME:		
ADDRESS:		
EMAIL ADDRESS:		
TELEPHONE:		
PROPERTY LOCATION (general or common address)	:	
DESCRIPTION OF REQUEST: Provide description of and reason for request.		
All information provided in this application is said to l State of Washington.	be true under penalty of perjury by the laws of the	
Applicant's Signature	Date	
This Certificate of Alteration Application is being submit	ted with my consent.	
Property Owner Signature	Date	