HYDC #	_____
Date Filed:	_____

Historic Yorktown Design Committee
Application for Architectural Review

I/We _____ request authorization under the terms of the Yorktown Historic District (Section 24.1-377 of the York County Zoning Ordinance) and the Yorktown Design Guidelines to undertake the property improvements described in this application.

Property Location/Address: _____

Tax Assessor's Parcel Number: _____

GPIN: _____

Proposed Action(s): (A check will appear in the box next to action selected)

	New Building		Repainting with existing color scheme
	Addition		Repainting with different color scheme
	Relocation		New roof – same color and materials
	Demolition		New roof – different color or materials
	Deck/Porch/Trellis		New/replacement windows
	Garage/Storage Shed		Signs (new or replacement)
	Walls/Fence		
	Other (please describe):		

Detailed description of proposed improvements/actions: Please describe the proposed exterior improvements and property modifications that you would like to undertake; attach architectural plans or sketches or photographs to depict the proposal.

A LIST OF ALL MATERIALS USED AND COLORS PROPOSED <u>MUST</u> BE SUBMITTED WITH THE APPLICATION. (including information for foundations, walls, doors, windows, trim, gutters/downspouts, roofing, lighting, sidewalks, mechanical equipment, decks, rails, chimney, fences, and others as applicable, include samples of materials and color charts).

Applicant / Property Owner

Name:_____

Address:_____

City/State/Zip: _____

Phone/FAX: _____ Email: _____

Representative

Name: _____

Firm: _____

Address:_____

City/State/Zip: _____

Phone/FAX: _____ Email: _____

The above named person/firm has permission to represent me regarding this request for architectural review. I understand that approval by the Historic Yorktown Design Committee (HYDC) of any construction, reconstruction, alteration, demolition or other modification of a building, structure, sign or exterior architectural feature shall expire 12 months from the date of approval.

Property Owner Signature: _____ Date: _____

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Signing this application form shall constitute the granting of authority to County officials and HYDC members to enter onto the property for the purpose of conducting the analysis of the application, taking photographs and posting signs to notify the public of the application.

PLEASE NOTE THAT CONSIDERATION WILL NOT BE GIVEN TO INCOMPLETE APPLICIATIONS

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Application was:

[ ] Approved

[ ] Approved with conditions

[ ] Denied

Date of HYDC Action: _____

Historic Yorktown Design Committee, P.O. Box 532, Yorktown, VA 23690
(757) 890-3320 Phone / (757) 890-4400 FAX