

**CITY OF CORTLAND'S
HISTORIC DISTRICT COMMISSION
MODIFICATION APPLICATION FORM**
For changes in the Historic District

Applicant: _____ Phone: _____ Date: _____

Applicant's Address: _____

Applicant's Business Name: _____

Proposed Project: ___ Signage ___ façade change ___ landscaping ___ Other : _____

Project Address: _____

Property owner's name if different: _____ Phone: _____

Owner's address: _____

Proposed Modification:

(Follow the Application Guideline form when preparing your proposal)

Reason for Modification:

Are any variances or other zoning permits required and if so, explain: _____

ANY WORK APPROVED BY THE HISTORIC COMMISSION MAY NOT BEGIN UNTIL THE APPLICANT HAS SIGNED AN ACCEPTANCE TO THE PROPOSED CONDITIONS (THE HISTORIC COMMISSION DECISION FORM). SUCH AN ACCEPTANCE SHALL BE DELIVERED TO THE ZONING OFFICER BEFORE THE COMMENCEMENT OF WORK AND BUILDING PERMIT BEING ISSUED IF APPLICABLE AND/ OR DISPLAYING OF ANY SIGNAGE.

Signature of applicant: _____ Date: _____

The property owner must be present if the proposed application houses more than one business.

The APPLICATION GUIDELINE SHEET MUST be complied with in full. Applications must be submitted to the City Clerk's Office. Check the MEETING AND SUBMISSION DATES on line. You must submit a total of ten (10) copies.