

TOWN OF HARWICH

HISTORIC DISTRICT AND HISTORICAL COMMISSION



APPLICATION AND CERTIFICATE FORM

Please submit this application to: **Town of Harwich Building Department**
732 Main Street, Harwich, MA 02645
Telephone: (508) 430-7506 Fax: (508) 430-4703

No exterior feature of a structure or building may be altered, and no structure or building may be erected in the Historic District unless the Commission shall have first issued the Certificate.

SECTION I: (Circle one)

- A. Certificate of Appropriateness:** Required for additions, new construction, or alteration (such as changes in design, material, color or outward appearances) of a building or structure visible from a public space; any addition to, or removal of appurtenances or features from a structure; any removal or demolition of a building or structure, or appurtenance or feature thereof.
- B. Certificate of Hardship:** Applicable in those instances where a Certificate of Appropriateness is inappropriate and such denial will involve substantial hardship to the Applicant. A Certificate of Hardship will not be granted where an approval constitutes a detriment to the public welfare, or derogates from the intent and purpose of the Historic District Act. The Commission cannot grant a Certificate of Hardship for a self-imposed hardship (e.g., owner-incurred costs to correct inappropriate or un-permitted alterations.)
- C. Certificate of Non-Applicability:** A way to acknowledge that a Certificate of Appropriateness is not required. This Certificate, along with photographs submitted as directed in Section IV, protects the Applicant against Commission enforcement actions for unauthorized work performed when undertaken as follows:
- a.** Additions, alterations or new construction not visible from a public space.
 - b.** Ordinary maintenance, repairs or replacement of architectural features that are damaged or worn; provided the work does not involve a change in design, color or outward appearances.

SECTION II: Applicant Information (Note: A non-owner may only apply in the event that the owner attaches a written waiver authorizing this Application)

Address of Proposed Work _____

Map _____ Parcel _____ Zone(s) _____

Applicant _____ Telephone _____

Mailing Address _____

SECTION III: *(Please specify all structures or features that will be affected)*

_____ Architectural Trim or Siding	_____ Lights	_____ Satellite Dish
_____ Barrier Free Access	_____ Masonry	_____ Signs
_____ Door(s), Doorway	_____ Paint Color	_____ Skylight
_____ Fence, Gate	_____ Parking	_____ Utilities
_____ Gutters, Downspouts	_____ Porch, Deck	_____ Window(s)
_____ House Numbering	_____ Roof	_____ Other*

**Please specify structures/feature not listed i.e. dormers, foundations, shed, wall, etc.*

SECTION IV: REQUIRED ATTACHMENTS TO BE INCLUDED HEREWITH

A. One Certified Abutter List – available from the assessor’s office

B. 8 Copies Required for all projects, as noted:

1. Photographs of sufficient number and quality to adequately document existing conditions.
2. A separate list of affected features (See Section III), specifying materials, colors, dimensions for each principal feature that will be affected.
3. Paint samples, as applicable.

C. Additional requirements* for building construction, additions or alterations excluding all roof resurfacing or siding projects.

4. Stamped Architectural elevation plans for building construction projects.
5. Stamped Site/plot plan specifying structure *in situ*, specifying all set-back.

(EXCEPT that scaled drawings may be submitted for fences, garden sheds and signs)

***NOTE:** Certificates of Non-Applicability have only to submit Section IV.B attachments.

By signing this Application the Applicant acknowledges that the Commission may deem “incomplete” an Application that fails to provide specified Attachments, or deem “incomplete” an Application where one or more specified Attachments, as submitted, does not provide sufficient information, and upon which the Commission may, in its discretion, rely to make an informed determination.

Signed _____ Date _____

Date(s) of Hearing or Determination: _____

Approved Denied Continued Withdrawn without Prejudice

Comments/Conditions: _____

Board Chair