



# CITY OF ASTORIA

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CA \_\_\_\_\_

## COMMUNITY DEVELOPMENT DEPARTMENT

1095 Duane Street • Astoria, OR 97103 • Phone 503-338-5183 • www.astoria.or.us • planning@astoria.or.us

### CERTIFICATE OF APPROPRIATENESS FOR IMMEDIATE APPROVAL (TYPE I)

This Certificate of Appropriateness, issued pursuant to the requirements of Article 6 of the Astoria Development Code, certifies that, at the time of issuance, the project referenced below is in conformance with all relevant criteria specified in the City of Astoria Historic Properties Ordinance.

Property Address: \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Map \_\_\_\_\_ Tax Lot \_\_\_\_\_ Zone \_\_\_\_\_

Historic Classification \_\_\_\_\_ Historic District \_\_\_\_\_

Applicant Name(s): #1 \_\_\_\_\_ #2 \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature(s): #1 \_\_\_\_\_ #2 \_\_\_\_\_

*If different than the Applicant*

Property Owner(s): #1 \_\_\_\_\_ #2 \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature(s): #1 \_\_\_\_\_ #2 \_\_\_\_\_

Proposed Changes: (attach "Before" photos; manufacturer's spec sheets; drawings, etc) \_\_\_\_\_

#### For Office Use Only

\_\_\_\_\_  
\_\_\_\_\_

Approval Signature, Community Development Department

Date

Attachments