



***Belle Grove Historic District***  
 c/o City of Fort Smith Planning Dept.  
 P.O. Box 1908 or 623 Garrison Ave., Rm 331  
 Fort Smith, AR 72902

**Certificate of Appropriateness Application Form**

*(please use blue or black ink only)*

**PROPERTY LOCATION**

Historic Name of Property \_\_\_\_\_

Address \_\_\_\_\_

Lot Number \_\_\_\_\_

Block Number \_\_\_\_\_

**OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**PERSON FILING APPLICATION, IF OTHER THAN OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**BUILDING DATA**

Construction Date: \_\_\_\_\_

Type of Construction: Wood Frame \_\_\_\_\_ Brick \_\_\_\_\_ Stone \_\_\_\_\_ Other \_\_\_\_\_

**Original Use:**

Single Family Residential \_\_\_\_\_

Multi-Family Residential \_\_\_\_\_

Hotel/Boarding House \_\_\_\_\_

Office \_\_\_\_\_

Commercial/Retail \_\_\_\_\_

Industrial \_\_\_\_\_

Vacant \_\_\_\_\_

Combined Uses \_\_\_\_\_

Other \_\_\_\_\_

**CONCISE DESCRIPTION OF PROPOSED WORK:** (Attach additional papers if necessary)

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**PROJECT ARCHITECT/ENGINEER:**

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**MINOR WORK APPROVAL**

\_\_\_\_\_ staff \_\_\_\_\_ date

Upon being signed and dated above by the Planning Director or designee, this application becomes the Minor Work Certificate of Appropriateness. It is valid until \_\_\_\_\_. Issuance of a Minor Work Certificate shall not relieve the applicant, contractor, tenant, or property owner from obtaining any other permit required by City code or any law. Minor work projects not approved by staff will be forwarded to the Certificate of Appropriateness Committee for review at its next meeting.

**CATEGORIES OF MINOR WORK**

- (A) Emergency, temporary maintenance and repair which does not permanently alter the distinctive features of the subject building, structure or property, all required City of Fort Smith permits are obtained, and the owner of the property commits to apply for a certificate of appropriateness to make permanent repairs within thirty (30) days of the date on which the administrative staff grants written approval of the emergency, temporary repair;
- (B) The installation of HVAC equipment that is located in the rear or on the side of the property and is entirely screened from public view with wood lattice panels or plantings;
- (C) The installation of electrical and telephone panels, cable connections, satellite dishes, gas meters, or window air conditioning units that are located on a building's rear facade;
- (D) The installation of a roof ventilation device not larger than twelve inches height and located

on the rear of the building's roof;

(E) The installation of a privacy fence that is made of wood with flat boards in a single row, no taller than six feet, located in the rear of the property and set back from the building's front facade at least one-half the distance between the front facade and the property's rear property line;

(F) Installation of a picket fence that is made of wood, no taller than three (3) feet, with pickets no wider than four (4) inches and spacing between pickets of not more than three (3) inches, and painted white or neutral color;

(G) Removal of a chain link fence;

(H) Installation of storm windows that match the design, configuration, and color of the existing windows;

(I) Repair and replacement of a sidewalk or driveway on public and private property that does not involve a change in size material, and location;

(J) The construction, replacement, or repair of a public street or alley; and,

(K) The painting of or installation of shingles on the roof of any building or structure provided the paint colors or shingle color is consistent with the Commission's adopted list of approved paint and shingle colors for use within the historic district.

## **CERTIFICATE OF APPROPRIATENESS**

**Please include the following items that are application specific:**

### **On Existing Buildings:**

- COMPLETE THE CERTIFICATE OF APPROPRIATENESS APPLICATION FORM
- CURRENT COLOR PHOTOGRAPH OF EXISTING APPEARANCE OF STRUCTURE showing its present condition and the existing materials, colors, and textures.
- ELEVATION DRAWINGS- Dimensional drawings of all elevations showing proposed exterior architectural changes.
- PAINT SAMPLES required when changing color. Provide manufacturer's samples or samples of actual paint. Indicate manufacturer's name and the name of the color.
- SIDING SAMPLE- Provide a piece of the siding or a manufacturer's brochure showing a picture of the siding and indicating the specifications.
- WINDOWS- indicate window frame material- wood, vinyl or aluminum- indicate size and style.
- SHINGLES- Provide a sample of the shingle and manufacturer's name and color of the shingle.
- OTHER EXTERIOR DETAIL NOT LISTED ABOVE. Provide sample of the detail along with the

manufacturer's name and specifications.

**On New Construction:**

- COMPLETE THE CERTIFICATE OF APPROPRIATENESS APPLICATION FORM.
- SITE PLAN OF PROPERTY (Recommended scale: 1 inch= 20 feet) Include location of all structures and outside equipment (trash, mechanical, common mail boxes, walls, fences, external lighting fixtures, existing and proposed structures, etc.) Show parking areas, driveways, walks, and other hard surface areas. Indicate on the site plan, materials to be used. A surveyed drawing of the perimeter of the lot(s) is required for all Category III applications that involve a change of footprint.
- ELEVATION DRAWINGS- Dimensional drawings of all exterior elevations. Show textures, architectural details and materials. An additional drawing showing landscaping is desirable. (Recommended Scale: at least 1/4 inch = 1foot).
- PAINT SAMPLES required when changing color. Provide manufacturer's sample or samples of actual paint. Indicate manufacturer's name and the name of the color.
- SIDING SAMPLE- Provide a piece of the siding or a manufacturer's brochure showing a picture of the siding and indicating the specifications.
- WINDOWS- indicate window frame material- wood, vinyl, or aluminum- indicate size and style.
- SHINGLES- Provide a sample of the shingle and the manufacturer's name and color of the shingle.
- OTHER EXTERIOR DETAIL NOT LISTED ABOVE. Provide sample of the detail along with the manufacturer's name and specifications.

Certificates of Appropriateness are effective immediately upon issuance. Any work done outside the scope of the Certificates of Appropriateness renders it null and void.

I hereby certify I am the owner, agent of the owner, or other person in control of the property and that the information given herein, and as shown on the application and Certificate of Appropriateness, is true and that I am authorized to obtain this Certificate of Appropriateness. I understand that if the construction and/or installation for which this Certificate of Appropriateness is issued, is contrary to the requirements of city codes or regulations, violations must be corrected. Approval by the Historic District Commission does not excuse the applicant, owner or agent from compliance with any other applicable codes, ordinances or policies of the City of Fort Smith unless expressly stated by the Commission or its staff.

***Upon approval of commission, all applicants must purchase a permit from the City Building Inspector.***

**Penalties:** Violation of the ordinance constitute a misdemeanor, and violators upon being found guilty shall be fined not less than \$10 nor more than \$500. Each day that a violation continues to exist shall constitute a separate offense\*\*. (Reference State Act 14-172-204)

\*\* (If cited for violation, applicant may appeal in court)

SIGNATURE OF APPLICANT \_\_\_\_\_ (Date)

The Planning Department will mail notices of hearing on all Certificate of Appropriateness applications to adjacent property owners at least 10 days prior to the date of the hearing and publish a notice of the Historic District Commission at least 1 time in a newspaper serving the population of Fort Smith at least 15 days prior to the hearing date.

Application is: Approved\_\_\_\_\_, Denied\_\_\_\_\_, Deferred\_\_\_\_\_

Reason for approval, denial or deferral:

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\_\_\_\_\_  
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\_\_\_\_\_  
*Signature of Historic District Chair*

\_\_\_\_\_  
*Date Action Taken*

\_\_\_\_\_  
*Date of Issuance*