



TOWN OF KILLINGLY

172 Main Street, Killingly, CT 06239
Tel: 860 779-5323 Fax: 860 779-5338

KILLINGLY HISTORIC DISTRICT COMMISSION

Application for Certificate of Appropriateness

IMPORTANT:

An incomplete application will not be accepted by the Commission. The application form plus all relevant information (drawings, photos, materials' list, etc.) must be submitted a minimum of twenty (20) days in advance of the next scheduled Commission meeting for public hearing at that meeting. Applications received after that date will be carried over to the next meeting. A public hearing will be scheduled for all projects and/or work which are not exempted.

FEE: \$25

Submission Date: _____ Date of Commission Action: _____

1. Location of Property: _____
2. Map: _____ Block: _____ Lot: _____
3. Owner: _____ Phone number: _____
4. Owner's Address (if different from location of property):

5. Type of work to be done: ☐ New Construction ☐ Sign
 ☐ Remodeling ☐ Parking/Driveway/Paving
 ☐ Demolition ☐ Other _____
6. Type of Structure: ☐ Dwelling ☐ Outbuilding ☐ Other _____
7. Work to be done by: ☐ Owner ☐ Contractor _____
8. Estimated start and completion dates: Start: _____ Completion: _____
9. Description of work to be done, as it affects exterior appearance:

(Signature of Owner)

Certificate of Appropriateness

Action taken by Historic District Commission:

☐ Exempted ☐ Granted as submitted

☐ Granted with the following conditions:

☐ Denied

This certificate is valid for a period of one (1) year from the date of issuance. Extensions of six (6) month periods may be granted upon request from the certificate holder. Approved certificates, where the approved work has not been started or completed, will be withdrawn upon the transfer of property ownership. The certificate will be reinstated by the Commission without a public hearing based upon a written request from the new owner and provided no change in the nature of the request is involved.

Killingly Historic District Commission _____
Commission Chair