



# GENEVA HISTORIC PRESERVATION COMMISSION REVIEW APPLICATION

Address of Property (Please Print): \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Day: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Day: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

Applicant's relationship to Owner if other than Owner:

Lessee/Tenant     Contractor     Architect     Other: \_\_\_\_\_

### TYPE OF WORK (Check all that apply)

- Exterior Alteration/Repair     New Construction
- Addition     Garage/Outbuilding
- Other: \_\_\_\_\_
- Demolition
  - Whole Primary Structure
  - Part Primary Structure
  - Garage/Outbuilding
  - Building Relocation

in consideration of this application and attached plans and specifications being made a part hereof, I/we will conform to all of the regulations set forth in the City of Geneva, Illinois Codes and Ordinances.

I/we further agree that all work will be in accordance with the plans and specifications that accompany this application, except for such changes as may be authorized or required by the Building Official or Historic Preservation Commission. On completion of the work, I/we agree to notify the Building Inspector at (630) 262-0280 to schedule an inspection of the property.

**Please submit 14 copies of all plans to the Community Development Department no later than 1 week prior to the meeting at which you are requesting review of your application by the Preservation Commission. The Preservation Commission meets at 7:00 p.m. on the 3<sup>rd</sup> Tuesday of each month at Geneva City Hall, 109 James Street, Geneva, Illinois. The applicant or the applicant's representative is required to attend the Preservation Commission meeting for the purpose of describing the proposed project and address any questions the members may have. Please direct any questions to the Community Development Director at (630) 232-0817.**

I/we further agree to post a copy of the approved plans with the Historic Preservation Stamp along with the permit on the subject premises in a place of public view.

\_\_\_\_\_  
Owner/authorized Agent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Owner/authorized Agent Signature

**Geneva Historic Preservation Commission Hereby Authorized**

HPC Chairman/Staff: \_\_\_\_\_

Approved As Submitted: \_\_\_\_\_

Approved As Corrected: \_\_\_\_\_

Plans Rejected: \_\_\_\_\_

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

**ADDITIONAL INFORMATION TO BE SUBMITTED WITH APPLICATION**

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**EXTERIOR ALTERATION/REPAIR**

Check each work item for which approval is requested:

- |   |  |
|---|--|
| <input type="checkbox"/> Architectural Feature (Decorative Ornamentation) | <input type="checkbox"/> Porch – Major Repair and /or Reconstruction |
| <input type="checkbox"/> Awning or Canopy                                 | <input type="checkbox"/> Retaining Walls                             |
| <input type="checkbox"/> Deck   | <input type="checkbox"/> Roof (Change in Shape, Features, Materials) |
| <input type="checkbox"/> Door   | <input type="checkbox"/> Satellite Dish                              |
| <input type="checkbox"/> Fence  | <input type="checkbox"/> Security Doors or Windows                   |
| <input type="checkbox"/> Gutters  | <input type="checkbox"/> Sidewalks                                   |
| <input type="checkbox"/> Light Fixture                                    | <input type="checkbox"/> Shutters                                    |
| <input type="checkbox"/> Mechanical System Units                          | <input type="checkbox"/> Siding                                      |
| <input type="checkbox"/> Masonry Cleaning, Repointing, Painting           | <input type="checkbox"/> Signs                                       |
| <input type="checkbox"/> Material Change (wood, brick, etc.)              | <input type="checkbox"/> Solar Collectors                            |
| <input type="checkbox"/> Cleaning, Painting (paint removal, etc.)         | <input type="checkbox"/> Storm Doors or Windows                      |
| <input type="checkbox"/> Paving (Parking lot, driveways, landscaping)     | <input type="checkbox"/> Windows, Skylights                          |

Other: \_\_\_\_\_

Describe in detail all work to be done for each item in the space provided on the following page. Include the following materials where appropriate and check appropriate box if included.

- A. Drawings, photographs, specifications, manufacturer's illustrations or other description of proposed changes to the building's exterior. To-scale drawings with dimensions will be required for major changes in design, e.g., roofs, facades, porches, and other prominent architectural features.
- B. If application is for any feature not on the primary structure, include a site plan.
- C. If material changes are proposed, include samples.

**NEW CONSTRUCTION/ADDITIONS**

Include the following materials where appropriate and check appropriate box if included.

For primary structure, outbuilding or addition:

- 1. Site plan with measured distances.
- 2. Elevation drawings of each façade with dimensions and specifications which clearly illustrate the exterior appearance of the project.
- 3. Drawings, photographs, samples, manufacturer's illustrations, or other description of material to be used. Drawings or other description of site improvements, e.g., fences, sidewalks, lighting, pavements, decks.

