



Charleston Historic Landmarks Commission

East End Historic District Minor Work Permit

Applicant Information	Property Information
Name:	Address:
Address:	Tax Map and Parcel:
Phone:	Zoning District:
Agent Name, Address and Phone Number: (if other than applicant)	Property Owner and Mailing Address: (if other than applicant)

IMPORTANT: This application must be typed or legibly printed and filed with the Planning Department, 915 Quarrier Street, Suite 1 Charleston, WV 25301. The following items should accompany this application: 1) a site plan drawn to scale; 2) photographs, elevations, testimonials or other documentation, which may support your application. THE PLANNING DEPARTMENT WILL NOT ACCEPT ANY INCOMPLETE APPLICATIONS.

Please describe the proposed work to be done on the property. _____

What measures are being taken to retain and preserve the historic character of the property? Are existing materials being restored or replaced in like-kind? _____

Are the distinctive, character-defining features of the structure being affected or altered by the proposed work? _____

Is the proposed work to be done on the primary façade or in an area that is visible from the public street? _____

I hereby affirm that all of the statements and information contained in or filed with this application are true and correct to the best of my knowledge.

Signature

Date

Planning Official Signature and Title

Date