



**CERTIFICATE OF APPROPRIATENESS**  
(Historic Preservation Commission)

**Major**

City of Arcadia Florida  
Community Development  
23 Polk Avenue North  
Arcadia, FL 34266  
(863) 494-4114  
City Website: *arcadia-fl.gov*

Date Stamp

Fee: \$65.<sup>00</sup>

R# \_\_\_\_\_

File No. : 24 - \_\_\_\_ CA

The City's Historic Preservation Ordinance (No. 955) requires all proposed development activity within Arcadia's Historic Preservation District be controlled through a Certificate of Appropriateness application. The Historic Preservation Ordinance can be found under Chapter 60 of the Arcadia Code of Ordinances. Please note an application approved by the City of Arcadia is required for submittal along with your Building Permit application materials administered by the DeSoto County Building Department.

**APPLICANT'S INFORMATION**  
(Agent or Contractor)

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No.: (        ) \_\_\_\_\_

Email: \_\_\_\_\_

**PROPERTY OWNER'S INFORMATION**  
(Leave Blank if Same as Applicant)

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone No.: (        ) \_\_\_\_\_

Email: \_\_\_\_\_

**II. Type of Building Structure and Development Activity Proposed**

<input type="radio"/> New Construction	<input type="radio"/> Manufactured	<input type="radio"/> Mobile	<input type="radio"/> Addition	<input type="radio"/> Demolition
<input type="radio"/> Shed	<input type="radio"/> Ground Sign	<input type="radio"/> Fence	<input type="radio"/> Deck	<input type="radio"/> Re-roofing
<input type="radio"/> Paint Color	<input type="radio"/> Other			

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. Property Information**

Parcel Address (if assigned): \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Subdivision, Block and Lot Nos.: \_\_\_\_\_

**IV. Zoning Information and Development Standards (for New Building Structures only)**

Zoning Map Designation: \_\_\_\_\_

Lot Size (sq. ft.): \_\_\_\_\_ Lot Length: \_\_\_\_\_ Lot Width: \_\_\_\_\_

Zoning Code Yard Setbacks:

Proposed Accessory Structure Setbacks:

_____ Front Yard	_____ Front Yard
<i>(if corner lot)</i> _____ Secondary Front Yard	<i>(if corner lot)</i> _____ secondary Front Yard
_____ Side Yard	_____ Side Yard
_____ Side Yard	_____ Side Yard
_____ Rear Yard	_____ Rear Yard
_____ 10' _____ Between Buildings (Per Code 110-631)	_____ Between Buildings

**V. Site Plan and Property Improvement Materials** – Please provide a copy of any property survey, site development plans, drawings, renderings, engineered plans, photos, vender specification sheets for prefabricated materials.

- Yes, please list attached exhibits: \_\_\_\_\_
- None, I intend to utilize City provided site plan sheet. I understand that I am required to include ALL property information, proposed improvements, and other such project delineations that may be necessary to confirm code compliance and to ensure there are no utility services conflicts.

**I understand that an incomplete application will be returned and will delay permit review.**

<p>Planning and Zoning Review:</p> <p><input type="radio"/> Approved</p> <p><input type="radio"/> Denied</p> <p>_____</p> <p>Zoning Inspector Signature</p> <p>Date: _____</p>	<p>Utility Systems Review:</p> <p><input type="radio"/> Approved</p> <p><input type="radio"/> Denied</p> <p>_____</p> <p>Utility Inspector Signature</p> <p>Date: _____</p>	<p>Notes, Restrictions, and Permit Coordination:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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