



ARB # _____
DATE FILED _____

**CITY OF WILLIAMSBURG
APPLICATION FOR ARCHITECTURAL REVIEW**

Architectural Review Board
401 Lafayette Street
Williamsburg, VA 23185-3617
(757) 220-6130
Fax (757) 220-6130

*****Applications are due by end of day, see schedule for due dates.*****

Property Owner's Printed Name _____ Address _____ City/State/Zip _____ Phone/FaxNo. _____ E-mail _____ Property Owner's Signature _____ Date _____ <p>By signing this application, I give the applicant permission to represent me regarding this request. I also give City of Williamsburg employees and members of the Architectural Review Board the right to enter my property.</p>	Representative's printed Name _____ Address _____ City/State/Zip _____ Phone/Fax No. _____ E-mail _____
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The signature of the property owner is required for the application to be processed. Any application submitted without the property owner's signature will not be processed and will be returned to the applicant.

DESCRIPTION OF PROPOSAL (please attach a separate sheet if necessary):

*****Office Use Only*****

Location of Proposal: _____

ARB District: _____ **Tax Map Number:** _____

Business Name (if applicable): _____

PLEASE NOTE THAT CONSIDERATION WILL NOT BE GIVEN TO INCOMPLETE APPLICATIONS.

- _____ Elevations and drawings to scale (nine sets if larger than 8.5"x 11"). One set if 8.5"x 11".
- _____ Colored renderings for commercial projects are required.
- _____ Site plan or survey plat of property.

A LIST OF ALL MATERIALS USED AND COLORS PROPOSED MUST BE SUBMITTED WITH THE APPLICATION.

The following list must be completed for the application to be processed. Samples of colors not on the approved color palettes must be submitted when the application is submitted for review. Failure to submit specific materials and colors will result in the application not being processed and returned for completion. For any materials that do not apply to the specific application, please note N/A in the space.

PROPOSED MATERIAL:

PROPOSED COLOR:

Foundation: _____	_____
Walls: _____	_____
Roof: _____	_____
Doors: _____	_____
Windows: _____	_____
Trim: _____	_____
Deck: _____	_____
Chimney: _____	_____
Gutters/Downspouts: _____	_____
Fence: _____	_____
Rails: _____	_____
Dumpster Screening: _____	_____
Driveway/Sidewalks: _____	_____

*****Office Use Only*****

Application was: [] Approved [] Approved with Conditions [] Denied

Date of ARB Action: _____

_____ for Architectural Review Board

Approval by the Architectural Review Board of this application shall expire 12 months from the date of approval by the Board unless the approval is granted in conjunction with a site plan which extends the approval date until the expiration date of the site plan.