



# TOWN OF WARRENTON

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## ARCHITECTURAL REVIEW BOARD CERTIFICATE OF APPROPRIATNESS

COA # \_\_\_\_\_

Assoc. Permit # \_\_\_\_\_

The Architectural Review Board (ARB) meets every **4<sup>th</sup> Thursday at 7:00pm** in Town Hall (21 Main Street). Applications requiring ARB are due by the **1<sup>st</sup> day of each month** (or the first business day immediately following) prior to the meeting. Each applicant or a representative, who has the authority to commit the applicant to changes as recommended or required by the ARB are required to attend this meeting or the application will be deferred. Please read the [Warrenton Historic District Guidelines](#) for additional information Historic District requirements.

The following materials are required in addition to a complete, signed application (check if submitted):

- Photographs of the area of work.
- Plans, drawings, product information sheets, and/or samples (Two hard/one digital copy).
- Accompanying permit applications (if required; this application also serves as a zoning permit).

### Project Owner

Address/Location: \_\_\_\_\_ GPIN: \_\_\_\_\_

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

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

### Applicant (If different then above)

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

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

### Applicant's Representative (If different then above. Must have authority to commit the applicant to make changes that may be suggested or required by the ARB)

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

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

### Complete description of each modification or improvement

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Is there an application relevant to this property pending or contemplated before another Town Board?

Yes  No  If so, specify: \_\_\_\_\_

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Name (Print or Type)

\_\_\_\_\_  
Name (Print or Type)

