

City of DeFuniak Springs  
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DeFuniak Springs, FL 32435

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## CERTIFICATE OF APPROPRIATENESS APPLICATION

**1. SUBJECT PROPERTY:**

Street Address: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Use of Property: \_\_\_\_\_ Is Use Changing?  Yes (explain required)  No

Year of Construction: \_\_\_\_\_ Age of Structure: \_\_\_\_\_

**2. HISTORIC DISTRICT (CHECK ALL THAT APPLY):**  Local Historic District  National Historic District  Main Street Area

**3. HISTORIC DESIGNATION:**  Contributing Structure  Non-Contributing Structure  Individually Designated

**4. TYPE OF WORK (CHECK ALL THAT APPLY):**  Alteration  Reconstruction  Rehabilitation  Maintenance  New Construction  
 Relocation  Demolition  Other(explain) \_\_\_\_\_

**5. SUMMARY OF REQUEST (attach extra sheets and supplemental information, as needed):** \_\_\_\_\_

**6. APPLICANT INFORMATION: (If the applicant is not the property owner, an agent affidavit is required.)**

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

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**7. PROPERTY OWNER(S) INFORMATION:**

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

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

**8. SIGNATURE AND ACKNOWLEDGEMENTS**

BY SIGNING BELOW, I certify that the information provided is complete and accurate, to the best of my knowledge. I understand that no work is allowed to begin without approval of this request, that a building permit may be required for the scope of work listed below, and that I must contact the building department to determine if a building permit is required.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

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**OFFICE USE ONLY: INTAKE OF APPLICATION PACKET**

**FILE NUMBER:** \_\_\_\_\_

**DATE RECEIVED:** \_\_\_\_\_

**APPLICATION ACCEPTED AS COMPLETE:** \_\_\_\_\_

(DATE AND INITIALS OF STAFF REVIEWER)



### SUBMITTAL REQUIREMENT CHECKLIST

Please clearly label your attachments as noted in bold below.

<input type="checkbox"/>	<b>Completed Application</b>
<input type="checkbox"/>	<b>Agent Affidavit, if applicable (blank forms are available on the City's website)</b>
<input type="checkbox"/>	<b>Existing Conditions:</b> Provide a graphic illustration of the property that is clearly legible and drawn at a scale sufficient to adequately show and identify the existing conditions of the property, including structures.
<input type="checkbox"/>	<b>Request Statement:</b> Provide a narrative statement explaining the nature of the request. Include an explanation about how the proposed project is consistent with the era of original construction, how it is consistent with the Secretary of Interior's Standards for Rehabilitation and how it is consistent with the surrounding historic properties. The request statement should discuss the design of the proposed project, proposed construction methods, and the impact of the proposed project on the historic features of the property and historic district. If demolition is proposed, the request statement must address the criteria for demolition established by the Land Development Code, features that will be demolished (if approved), plan for disposal of materials, the conditions that will exist on the site after the demolition.
<input type="checkbox"/>	<b>Proposed Site Plan:</b> Provide a graphic illustration of the property that is clearly legible and drawn at a scale sufficient to adequately show and identify the proposed improvements.
<input type="checkbox"/>	<b>Architectural Elevations:</b> Provide exterior elevations of the proposed project.
<input type="checkbox"/>	<b>Materials Description/Samples:</b> Provide information about proposed materials, i.e. textures, paint colors, color and type of brick and/or mortar to be used, samples of proposed materials when the original material will not be retained, etc.
<input type="checkbox"/>	<b>Site and Building Photographs:</b> Provide site layout, except where there are no dimensional changes to the improvements; and photographs of the structure to be altered or, in the case of new construction, photographs of the continuous properties.
<input type="checkbox"/>	<b>Other Information:</b> Provide other information that may assist in evaluating the request (optional, unless requested by the City)

### ADDITIONAL SUBMITTAL ITEMS FOR ARCHAEOLOGICAL SITES

<input type="checkbox"/>	<b>Area of Work:</b> Provide a graphic illustration of the property indicating areas of work that might impact the surface or subsurface of the archaeological site or sites.
<input type="checkbox"/>	<b>Mitigation Measures:</b> Provide a narrative statement describing the proposed mitigation measures to limit impacts to archaeological resources resulting from the proposed project.
<input type="checkbox"/>	<b>Archaeological Surveys (if applicable):</b> Provide archaeological surveys, including the disturbance of human burials.

NOTICE: All information submitted with the application becomes a part of the public record and will be a permanent part of the file. Staff will review this application for compliance with requirements of the DeFuniak Springs Land Development Code. The applicant will be notified of any deficiencies.

#### OFFICE USE ONLY: INTAKE OF APPLICATION PACKET

FILE NUMBER: \_\_\_\_\_

RESULT OF REVIEW:  APPROVED  APPROVED WITH CONDITIONS  DENIED

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

STAFF SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_