



CITY OF LAUREL HISTORIC DISTRICT COMMISSION

8103 Sandy Spring Road • Laurel, MD 20707 • (301) 725-5300 • Fax (301) 490-5068 ecd@laurel.md.us

This authorization does not by its issuance preclude or replace permits required by other departments or agencies. Please familiarize yourself with the Historic District Guidelines provided at <https://www.cityoflaurel.org/boards/commissions/historic-district-commission>

HDC CERTIFICATE OF APPROVAL APPLICATION

STEP 1: FOR APPLICANT TO COMPLETE

DATE OF APPLICATION: _____

TYPE OF REQUEST (Check all that apply):

Sign *Tree Removal* *Shutters* *Shed*
Roof *Windows* *Paving* *Fence*
Garage *Porch* *Paint* *Addition*
Demolition *Other:* _____

ADDRESS OF PROPERTY: Laurel, Maryland 20707

OWNER'S NAME, ADDRESS, PHONE & EMAIL:

CONTRACTOR'S NAME, ADDRESS, PHONE AND EMAIL:

WORK DESCRIPTION (Please be as detailed as possible):

Example: Request to repaint dark blue porch white. New color will be Pure White Sherman Williams #3245, see current photos & paint sample

APPLICANT'S NAME, ADDRESS, PHONE AND EMAIL:

***COMPLETE FOR SIGNAGE or AWNING REQUESTS ONLY:**

(Check one)

FLATWALL _____

PROJECTING _____

SIGNBAND _____

FREESTANDING _____

(Details)

SIZE: _____

MATERIAL: _____

MESSAGE: _____

COLORS: _____

LIGHTED SIGN: _____

IF YES, TYPE: _____

X _____
SIGNATURE OF APPLICANT

DATE

STEP 2: FOR CITY STAFF TO COMPLETE

MEETING DATE: _____

Yes No Staff Approval?

TAX ID (ACCOUNT) #: _____

Yes No Work started *without* Approval?

PERMIT NUMBER: _____

Yes No Qualifies for Tax Credit?

Yes No Building Permit Required?

Yes No Public Notice Sign Required?

STEP 3: STAFF APPROVAL SIGNATURES

APPROVAL DATE: _____

CONDITIONS AND/OR COMMENTS: _____

HISTORIC DISTRICT COMMISSION _____

PLANNING AND ZONING _____