

Application for Certificate of Appropriateness

City of Wauchula
Planning & Zoning Department
225 E. Main Street, Suite 106
Wauchula, FL 33873
Ph: (863) 773-9193 Fax: (863) 773-0436
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1. Address of property where work is to be performed: _____

2. Applicant's Name: _____

Address: _____

City: _____ St: _____ Zip Code: _____

Work Phone: _____ Home Phone: _____

Owner's Name: _____

Address: _____

City: _____ St: _____ Zip Code: _____

Work Phone: _____ Home Phone: _____

3. The present use of the property: _____

4. Description of work to be done (use additional sheets if necessary): _____

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5. Zoning HC-1 Setbacks: Front 0 Side 0 Rear 30

6. Documentation Submitted: Site Plan _____

Photographs _____

Building Plans/Elevations _____

Samples/Swatches _____

Drawings/Sketches _____

Other _____

Signature of the Applicant

Date

Signature of Owner or Officer of Company

Date