



**Hull Historic District Commission**

**253 Atlantic Avenue Hull MA 02045**

**APPLICATION FOR REVIEW / CERTIFICATE OF APPROPRIATENESS**

1. Date of Application: \_\_\_\_\_
2. Date of Acceptance of Application by HDC: \_\_\_\_\_
3. Address of Property \_\_\_\_\_
4. Owner: \_\_\_\_\_
5. Applicant *[if not Owner]*: \_\_\_\_\_  
address: \_\_\_\_\_  
e-mail \_\_\_\_\_  
phone: \_\_\_\_\_
6. Architect: \_\_\_\_\_  
address: \_\_\_\_\_  
e-mail \_\_\_\_\_  
phone \_\_\_\_\_
7. Contractor: \_\_\_\_\_  
address: \_\_\_\_\_  
e-mail \_\_\_\_\_  
phone: \_\_\_\_\_
8. Brief description of proposed work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Documentation attached [all drawings to scale; 11 X 17 format preferred] :
  - ☐ Photos / drawings of existing conditions
  - ☐ Plans [floor, roof]                      ☐ Elevations
  - ☐ Catalog / product information
  - ☐ Details [molding, trim, etc.]
  - ☐ Site survey [as required]
10. Signature of applicant: \_\_\_\_\_