



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: _____

ADDRESS OF PROPERTY:

Laurel, Maryland 20707

OWNER'S NAME, ADDRESS, PHONE & EMAIL:

TYPE OF REQUEST (Check all that apply):

Sign____ Tree Removal____ Shutters____ Shed____
Roof____ Windows____ Paving____ Fence____
Garage____ Porch____ Paint____ Addition____
Demolition____ Other:_____

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

CONTRACTOR'S NAME, ADDRESS, PHONE AND EMAIL:

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

- Yes No Staff Approval?
- Yes No Work started *without* Approval?
- Yes No Qualifies for Tax Credit?
- Yes No Building Permit Required?
- Yes No Public Notice Sign Required?

MEETING DATE: _____

TAX ID (ACCOUNT) #: _____

PERMIT NUMBER: _____

STEP 3: STAFF APPROVAL SIGNATURES

APPROVAL DATE: _____
CONDITIONS AND/OR COMMENTS: _____

HISTORIC DISTRICT COMMISSION _____

PLANNING AND ZONING _____