



Town of Barnstable
Old King's Highway Historic District Committee

367 Main Street, Hyannis, Massachusetts 02601
 Telephone: (508) 862-4787
 Email: erica.brown@town.barnstable.ma.us



Application for
DEMOLITION OR RELOCATION
 OF A BUILDING OR STRUCTURE

Application is hereby made with a complete electronic colored set, for the issuance of a Certificate of Appropriateness under Section 6 of Chapter 470, Acts and Resolves of Massachusetts, 1973, for proposed work as described below and on plans, drawings, or photographs accompanying this application for:

Date _____ Date Built: _____ **Map & Parcel** _____

Homeowner _____ Phone _____
 Street address _____ Email _____
 Village _____
 Mailing address _____ Signature _____

Agent/Contractor _____ Phone _____
 Agent Address _____ Email _____
 Agent Signature _____

This certificate expires one year from the stamped approval date or upon the expiration of Building Permit, whichever date shall be later. A one year extension may be requested, in writing, to the Old King's Highway Administrative Assistant at 367 Main Street, Hyannis, MA 02601. This request must be received at least 30 days prior to the date of expiration.

There is a 10 day appeal period (14 day waiting period) for all applications after which time your approval paperwork will be available for pickup and building permit sign-off. All applications are subject to meeting any applicable code requirements.

DEMOLITION OF House Part of House Garage Barn Stable Stone Wall Commercial
 Other _____

Square footage of footprint of building (s) to be demolished: Building 1: _____ Building 2: _____

Square footage of total floor area of building (s) to be demolished: Building 1: _____ Building 2: _____

If application is for removal and relocation, state where: _____

- Checklist:** Application, Electronic Copy Site Plan Photographs of all elevations to be demolished
 \$120 Application fee Legal ad fee (billed) Postage Stamps

	<i>For Committee use only</i> This Certificate is hereby APPROVED DENIED By a vote of Ave Nay Abstain Date _____ _____ Members signatures _____ _____ Conditions of Approval _____
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