

**THE BOROUGH OF SEWICKLEY  
HISTORIC REVIEW COMMISSION APPLICATION  
FOR EXTERIOR WORK IN A HISTORIC DISTRICT**



Date: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Applicant name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Property owner name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property owner address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Block/lot #: \_\_\_\_\_ Zoning district: \_\_\_\_\_

**REQUIREMENTS**

Dependent upon the scope of the project, the building inspector will determine which of the requirements are necessary in each case to accompany the application in order for the commission to make an informed decision.

1. Photographs: 3" x 5" (or larger) photographs, in color if possible, showing the existing structure from all four (4) sides, its relationship with other structures on site or on adjacent property and its relationship on its block.
2. Site Plan: Scale 1 inch = 20.0 feet, identifying all property lines, metes and bounds, all structures, paved areas, acreage noted and adjacent properties with owners name noted.
3. Floor Plan or Plans: Showing detail for any affected area ¼ inch = 1.0 feet, detail and note affected area.
4. Elevations: Showing detail for any affected areas ¼ inch = 1.0 feet.
5. Prospective and/or other renderings: If necessary to enhance the presentation.
6. General product specifications/cuts: Noting products to be used, i.e., doors, windows, walls porches, light fixtures, etc.
7. Samples: Finish materials as may be necessary to enhance the presentations, i.e.; Bricks, siding, shingles.
8. Historic Information: Any available documentation of the history of the site and the structure and its architectural style would be useful to the commission in its deliberations.
9. Sections:

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SUBMITTED MATERIALS	PROVIDED	ACCEPTED	DATE
A. PHOTOGRAPHS			
B. SITE PLAN			
C. FLOOR PLAN OR PLANS			
D. ELEVATIONS			
E. PERSPECTIVE/RENDERINGS			
F. GENERAL PRODUCT SPECS.			
G. SAMPLES			
H. HISTORIC INFORMATION			
I. SECTIONS			

Signatures:

Owner (mandatory): \_\_\_\_\_

Applicant: \_\_\_\_\_

Owners Representative: \_\_\_\_\_

Date of Historic Review Committee Meeting: \_\_\_\_\_

Recommendation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Secretary

Sewickley Borough Council at its regular meeting on \_\_\_\_\_, approved/denied this application. (DATE)

\_\_\_\_\_  
PRESIDENT of COUNCIL