



ARB

CERTIFICATE OF APPROPRIATENESS APPLICATION INSTRUCTIONS

Any exterior improvement to a structure or property in Downtown (B-1 Zoning) and City Point (TH-1) must obtain a Certificate of Appropriateness (COA) before the improvements are made. The Architectural Review Board reviews each COA application for approval at regularly scheduled monthly meetings.

The process for obtaining a COA is as follows:

1. Complete the Certificate of Appropriateness application. All questions must be answered fully with as much description as possible.
2. Attach supporting documentation such as architectural renderings, elevations, mock-ups, site plans, color swatches, paint samples, manufacturer’s product sheets, or any other information that provides the ARB with an accurate description of the material improvements.
3. Provide a full-color image of each building side that will be improved. Include as much of each façade in the image as possible.
4. By the deadline date, submit the application, supporting documentation, and façade images to the Hopewell Department of Planning & Development below.
 - Application deadline dates are firm.
 - **Applications must be complete at the time of submission. Incomplete applications will not be placed on the agenda for ARB consideration.**
 - Designs must be final at the time of submission.
 - ARB meetings are typically held on the first Wednesday of each month at 3:30 p.m. in the Sally Port Conference Room in the Hopewell Municipal Building (300 N. Main St.). Enter the conference room to the left of the building from the rear parking lot.
 - The applicant is encouraged to attend the meeting to answer any questions.

2025 Meeting Dates *	2025 Application Deadlines
January 8	December 20, 2024
February 5	January 24
March 5	February 21
April 2	March 21
May 7	April 25
June 4	May 23
July 2	June 20
August 6	July 25
September 3	August 22
October 1	September 19
November 5	October 24
December 3	November 21

Meeting and deadline dates are subject to change—Contact Dept. of Planning & Development to confirm.

QUESTIONS? Contact Kelly Davis, Senior Planner (804-541-2269; kdavis@hopewellva.gov)

HOPEWELL DEPARTMENT OF PLANNING & DEVELOPMENT, 300 N. MAIN STREET, HOPEWELL, VA 23860



CERTIFICATE OF APPROPRIATENESS
Architectural Review Board
City of Hopewell
Department of Planning & Development

300 N Main St., Hopewell, VA 23860
 Office: (804) 541-2220 Email: dev.zone@hopewellva.gov

I understand that all work and materials used in this installation shall conform strictly to the City of Hopewell ordinances and the Virginia Uniform Statewide Building Code and that this Certificate of Appropriateness expires if work is not commenced within six (6) months from the date of issuance. **Answers must be provided to all questions. FEE: \$0.00**

Address of Work: _____ **Parcel#:** _____ **Date:** _____

Applicant Information:

Name: _____ **Daytime Phone:**() - Cell:() -
Address: _____ **Email:** _____
City: _____ **State:** _____ **Zip:** _____ **Will you or a representative be attending the meeting?** _____

Type of Work: Check all that apply:

<u>Exterior Improvement</u>	<u>Accessory Structure</u>	<u>Fencing</u>	<u>Signage</u>	<u>Construction</u>
<input type="checkbox"/> Window Replacement	<input type="checkbox"/> Shed	<input type="checkbox"/> Front	<input type="checkbox"/> Bldg. Mounted	<input type="checkbox"/> Residential
<input type="checkbox"/> Painting	<input type="checkbox"/> Carport	<input type="checkbox"/> Rear	<input type="checkbox"/> Window/s	<input type="checkbox"/> Commercial
<input type="checkbox"/> Roof	<input type="checkbox"/> Detached Garage	<input type="checkbox"/> Side	<input type="checkbox"/> Projecting	<input type="checkbox"/> Institutional
<input type="checkbox"/> Siding	<input type="checkbox"/> Pool (above ground)	<input type="checkbox"/> Corner Lot	<input type="checkbox"/> Freestanding	<input type="checkbox"/> Addition
<input type="checkbox"/> Gutters	<input type="checkbox"/> Gazebo	<input type="checkbox"/> New	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Deck	<input type="checkbox"/> Ramp	<input type="checkbox"/> Replacement		<input type="checkbox"/> Demo*
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____			*Requires Public Hearing

Color(s): _____ **Manufacturer:** _____ **Material:** _____
Height: _____ **Width:** _____ **Depth:** _____ **Location:** _____
Expected Construction Start Date: _____ **Expected Construction Finish Date:** _____
Other Comments: _____

Who is Completing the Work?: **Applicant:** _____ **Contractor:** _____ **Contractor Name:** _____

Required Attachments (as applicable):

<u>Exterior Improvement</u>	<u>Accessory Structure</u>	<u>Fencing</u>	<u>Signage</u>	<u>Construction</u>
<input type="checkbox"/> Color swatches	<input type="checkbox"/> Color swatches	<input type="checkbox"/> Images of proposed fencing	<input type="checkbox"/> Sign Mock-up	<input type="checkbox"/> Elevations
<input type="checkbox"/> Photos—existing conditions	<input type="checkbox"/> Elevations	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Photos of Sign location	<input type="checkbox"/> Site Plan
<input type="checkbox"/> Images of proposed new items to be installed	<input type="checkbox"/> Site Plan		<input type="checkbox"/> Elevation with proposed sign	<input type="checkbox"/> Samples of Materials
	<input type="checkbox"/> Samples of Materials			

Describe other items the applicant would like to submit: _____

I understand that this is an application for a Certificate of Appropriateness (COA) and that work may not begin until the COA and all related permitting, if required, have been approved.

Signature of Applicant: _____ **Date:** _____

APPROVAL

ARB Chairman Signature: _____ Print: _____ Date: _____

Dept. of Development Signature: _____ Print: _____ Date: _____

DENIAL

ARB Chairman Signature: _____ Date: _____ Dev. Dept. Initials: _____ Date: _____

Reason: _____
