

## Certificate of Appropriateness

DAVIDSON COLLEGE WATSON LIFE SCHENCE ROOF

#### **Application Requirements**

Date Received				
		Application Fee per Town of Davidson Fee Schedule		
	$\boxtimes$	Contact Information		
	$\boxtimes$	Project Description (including General Statement of Intent)		
	$\boxtimes$	Statement of Compliance with Section 9 and Section 22		
		Master Plan or Conditional Planning Area (including all documents, plans, maps, and conditions of approval)		
		Environmental Inventory in accordance with Section 8.2 (including adjacent properties and buildings)		
	X	Color Photos (including existing and adjacent sites and building(s) taken from the perspective of the public streets adjacent to the site)		
		Site Schematic Design in accordance with Section 8.8		
		Building Schematic Design in accordance with Section 8.4		
		Landscape Schematic Design in accordance with Section 8.6		
		Building Perspective in accordance with Section 8.4 D		
	$\boxtimes$	Building Materials/Colors		
	X	4-Sided Building Elevations and Color Front Elevations		
As the applicant, I hereby confirm that all the required materials for this application are authentic and				
have been submitted to the Town of Davidson Planning Department.				
1(onal 10) See 2 3/5/2018				
Applicant's Signature // Date				



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DAVIDON C/EGE WATON LIFE THENCE ROT

#### **Contact Information**

	Applicant's Information
Name:	RONAIE SHIRLEY - PAVIDSON COLEGE
E-Mail:	ROSHINLEY @ DAVIDSON. Edu
Mailing Address:	Box 7166
	DAVIDSON, N.C. 18035-7166  704-894-2015 Mobile Phone: 704-507-4835
Business Phone:	704.894-2015 Mobile Phone: 704-507.4835
	Property Owner's Information (If Different from Applicant)
Name:	SHOTE
E-Mail:	
Mailing Address:	
Business Phone:	Mobile Phone:
	Architect's Information
Name of Firm:	
Architect's Name:	
E-Mail:	
Mailing Address:	
dusiness Phone;	Mobile Phone:



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DAVIDSON COLLEGE WATSON LIFE SCIENCE ROOF

#### Project Description

Application Date:	3/1/2018
Project Location:	(Indicate street frontage, nearest intersection, and address, if assigned)
Tax Parcel(s):	316201A
Planning Area:	
Master or Conditional Pla	an:
	(Include any conditions of approval)
General Statement of Inte	- 1 1 1 11-
Project Details:	JEAM 1000T
Project Details.	new structure addition exterior alteration
	sign vendor cart demolition
Building Type:	Beick
Building Materials:	METAL STANDING SEAM
Colors:	GRAY
Architectural Features:	
Existing Site Conditions:	(include significant physical, environmental, and cultural features; significant and heritage trees, existing structures; and infrastructure and street layout)



# CERTIFICATE OF APPROPRIATENESS

The Design Review Board hereby certifies that the ap	plication
ROMNIE SHIRLEU - DAVID	SON ( ) /FONE
Name of Applicant	
DAVIDSON (p//ERE. WA/SO	N LIFE SCIENCE ROOF
Halic of Hoject	1
225 CONCORD R.D. DA	VIDSON, N.C. 28035-7166
is approved for:	
new structure addition or expansion	exterior alteration or reconstruction relocation
demolition sign(s) vendor cart	exterior lighting exterior paint color(s)
other	
The following conditions are attached to this approval:	
does not negate any protective covenants or deed restrict	oplicable codes, ordinances, and regulations. This certificate ions on the property. Any change in the applicant's plans
requires the filing of a revised application with the Town	of Davidson, NC.
Chair, Historic Preservation Commission	Date









