



**City of Loudon
Codes Enforcement**

P.O. Box 189
Loudon, TN 37774
(865) 458-7520

**City of Loudon
Historic Zoning Commission
Application for Certificate of Appropriateness**

Applicant Name:	
Applicant Address:	
Applicant Telephone:	

Name of Owner: _____

Property Address: _____

Current Use of Property: _____

Proposed Action:

Sign: _____* Alterations/Repairs: _____** Addition: _____***

Other: _____**/** New Construction: _____*** Demolition: _____**

* Sign proposals shall include sign dimensions, letter size, style, color and drawing showing location

** Description only

*** Supporting materials required

Description: _____

If required all supporting materials must be provided with this Application.
Materials may include photographs, plans, drawings or other documentation to fully illustrate the property and proposed work.
The Applicant or Representative must attend the City of Loudon Historic Zoning Commission meeting in which this application will be reviewed.
No Action will be taken if all required materials are not provided or the Applicant or Representative is not present at the meeting.

Owner Agent _____
Applicant Signature

Date: _____

Approved: _____ Approved With Conditions: _____ Rejected: _____

Conditions: _____

Chairman's Signature: _____