

## HISTORIC PRESERVATION COMMISSION REVIEW

## APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

PURSUANT TO THE PROVISIONS OF CHAPTER 48
HISTORIC PRESERVATION LAW OF THE VILLAGE OF GREENPORT

	THE VILLAGE OF GREENPORT
DATE OF APPLICATION:	Nov 22, 2022
LOCATION OF PROPERTY	
SUFFOLK COUNTY TAX M	MAP NUMBER:
PROPERTY OWNER:	Scutt Gonzaler
ADDRESS: 714	Main St Green want PHONE:
EMAIL ADDRESS:	3. Com
ARCHITECT/DESIGNER: _	i som
ADDRESS:	PHONE
EMAIL ADDRESS:	PHONE:
Type of Proposed Work  COMMERCIAL   RESIDENTIAL	
Site Work	* · · · · · · · · · · · · · · · · · · ·
FENCE AND GATES DRIVEWAY, WALK, PATIO, OTHER PAVEMENT MAJOR EXCAVATION OR REGRADING. OR BERM SWIMMING POOL, TENNIS COURT OTHER STRUCTURAL LANDSCAPE ELEMENT SIGNAGE AND AWNINGS - SUBMIT SCALE DRAWINGS TO INDICATING TO FOLLOWING: - SIZE OF EACH SIGN - COLOR - FONT - LOCATIONS OF ALL SIGNAGE AND AWNINGS ON BUILDING - PROPOSED MATERIALS MODERN FEATURES - SOLAR PANELS - SKYLIGHTS - OUTDOOR SHOWERS OTHER	
Landscape Planting	
HEDGE ALC	ONG STREET AND/OR PROPERTY BOUNDARY LINES INTENDED TO SCREEN OTHER WORK DESCRIBED IN THIS APPLICATION

Buildings
MEW CONSTRUCTION ADDITION DEMOLITION REMOVAL ACCESSORY BUILDING
Building Alterations
EXTERIOR WALL MATERIAL ROOF MATERIAL AND COLOR CHIMNEY MATERIAL FOUNDATION MATERIAL DOORWAYS (INCLUDING STORM/SCREEN DOORS) WINDOWS (INCLUDING STORM/SCREEN SASH) AND SHUTTERS PORCHES AND STEPS TRIM AND DECORATIVE DETAIL GUTTERS AND LEADERS PAINT AND STAIN EXTERIOR LIGHTING OTHER
PROVIDE A GENERAL DESCRIPTION OF THE PROPOSED WORK (USE ADDITIONAL SHEETS IF NECESSARY, REFER TO THE
Continuing work on the Waster Front Cottage. We want to replace 6 windows will
Anderson & over 6, 400 series, double hung, full divided light. We replaced 8 windows last window. There are 9 windows on SE side of the building.
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IST ALL EXHIBITS SUBMITTED WITH THIS APPLICATION. ACTUAL SAMPLES OF MATERIALS AND/OR DESCRIPTIONS OF CTUAL MATERIALS ARE REQUIRED. (REFER TO THE INSTRUCTIONS FOR THE REQUIRED SUBMISSIONS).
OTHER APPROVALS REQUIRED:
SIGNATURE OF OWNER OR AUTHORIZED AGENT:
DATE:



