



Application for Architectural Board of Review Submission FENCE/RETAINING WALL/WINDOWS/SIDING

Village of Chagrin Falls – Building Department

Village Hall 21 W. Washington St. Chagrin Falls, OH 44022 Phone # 440-247-5050 – Fax # 440-247-2082

Building Inspector: Harry Edwards Email: Harry@chagrin-falls.org Direct: 440-247-3156

Building Administrative Assistant: Katie Knauff Email: Katie.Knauff@chagrin-falls.org Direct: 440-247-1911

How to Submit & Attend

- ABR convenes twice monthly, the first and third Tuesday of each month.
- FENCE/RETAINING WALL submissions are required to be submitted by noon, **11-days before the meeting you wish to attend.**
- WINDOW/SIDING submissions are required to be submitted by noon, **20-days before the meeting you wish to attend.**
- Please visit the Architectural Board of Review section of our website (www.chagrin-falls.org) to view each week’s agenda & on how to attend.
- Agendas are posted ON OUR WEBSITE ONLY approximately 5 days prior to the meeting.

Costs & Submission Requirements

- Please submit \$30 fee with this application in addition to all permit forms & fees (**separate checks for ABR fees & Permit fees**).
 - IF Historical Significance Report (HSR) required, additional \$300; (applicable to windows/siding only IF home >50 yrs).
- IF REVISING & RESUBMITTING no additional submission fee required.
- FENCE/RETAINING WALL PERMITS REQUIRE APPROVAL; *only if in proximity to historical structure.*
 - Please fill out FENCE/RETAINING WALL Permit Form for the ABR submission to be complete.
 - Please submit \$50 fee for FENCE PERMIT.
 - Once approved by ABR a permit will be issued.
- WINDOW/SIDING PERMITS REQUIRE APPROVAL; *when proposing any type of changes to material or style.*
 - Please fill out WINDOW OR SIDING Permit Form for the ABR submission to be complete.
 - Once approved by ABR a permit will be issued.
 - \$100 permit fee cost for window or siding, minor building permit.

Submission Information

Date of Meeting Submitting for: _____ Submission Description: _____

Submitting For: Preliminary Final Revise & Resubmit # _____ Field Change

Property Address: _____ Property Owner: _____

Property Owner Ph #: _____ Property Owner Email: _____

Applicant Information

Name: _____ Address: _____

Email: _____ Phone #: _____

Signature of Applicant

Date

OFFICE USE ONLY

ABR #: _____

ABR DATE: _____

ABR CHAIRMAN: _____