



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

Village of Chagrin Falls – Building Department

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

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Building Administrative Assistant: Katie Knauff Email: [Katie.Knauff@chagrin-falls.org](mailto: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 & SIGN submissions are required to be submitted by noon, **11-days before the meeting you wish to attend.**
- SIDING & WINDOW submission 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](http://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; (this applies to windows and siding only).
- IF REVISING & RESUBMITTING no additional submission fee required.
- ALL SIGN PERMITS REQUIRE ABR APPROVAL.
  - Please fill out SIGN Permit Form for the ABR submission to be complete.
  - Please submit \$50 fee/per sign for SIGN PERMIT.
  - Once approved by ABR a permit will be issued.
- 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.
- WINDOWS/SIDING PERMITS involving CHANGES to style or material; **MUST BE SUBMITTED 20 DAYS PRIOR TO MEETING**
  - Please fill out WINDOW or SIDING Permit Form for the ABR submission to be complete.
  - Please submit \$100 fee for WINDOW or SIDING PERMIT.
  - Once approved by ABR a permit will be issued.

## 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: \_\_\_\_\_