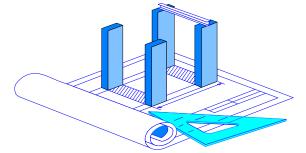
CASE	
No	



APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

BUILDING IMPROVEMENT APPLICATION

DESIGN REVIEW BOARD/WARREN REDEVELOPMENT & PLANNING CORP.

Applicant:	Phone:	
Building Owner:	Phone:	
Building Address:		
Owner Address:(If different than above)	Phone:	
Name of Architect:		
Address:	Phone:	
Description of Proposed Property Imp	provements:	
Please submit application along with phodescriptions to:	otographs, drawings, sketches and detailed	
Warren Redevelopment and Planning Corp. 333 Harmon Ave NW Warren, Ohio 44483 Phone: 330-841-2566 Fax: 330-841-2738		
Date Received	Applicant Signature Date	
	Building Owner Signature (if different from applicant)	