

# City of Bridgeport, Connecticut HISTORIC DISTRICT COMMISSION

ROOM 210 - 45 LYON TERRACE BRIDGEPORT, CONNECTICUT 06604 TELEPHONE: (203) 576-7217 FAX: (203) 576-7213

> HISTORIC DISTRICT COMMISSION #1 STRATFIELD HISTORIC DISTRICT

### **APPLICATION CHECKLIST**

- 1. Submit the original application form signed by the property owner, applicant and/or agent (page 3).
- 2. Include the Name, Address, Telephone Number and Email address of the property owner or the agent indicated on the application form.
- 3. Photographs (8" x 10") of the house and the specific areas encompassed within the scope of the work repairs or modifications; material samples, brochures and any technical specification or other information relevant to support the application.
- 4. Professional, drawn to scale, plans including floor plans and elevations highlighting architectural details and selected construction materials are required if proposed work includes new construction or the modification of the existing footprint of the existing structure.
- 5. For repairs or replacement of finishing materials, include samples of the materials, manufacturer's brochures and material specifications. Examples: siding, windows, doors, roof shingles, etc.

Items listed must be submitted in sets of five (5) (actual material samples can be submitted singular).

Revised 3/21/2018



## Application for a Certificate of Appropriateness Historic District Commission • Bridgeport, Connecticut

CORPORATED 1836	Application Number	(e		_ Date		
INSTRUCTIONS: Complete this application form in lnk (please print clear order to be considered at the regular meeting on the first Tuesday of the			) or typewriter. Submit by the 15th of the month in llowing month. Submit eight (8) copies.			
AN APPLICATION IS 7-147 as amended by material attached.	HEREBY MADE for issue Public Act 80-314) for w	uance of a Certificate of Appro ork as described below, and o	opriateness on plans, dra	(under General S awings, photogra	Statues of Connecticut phs and descriptive	
Local Historic District:						
		(c		Built:		
Address of Proposed	Work:					
Owner of Record:		A CONTRACTOR OF THE CONTRACTOR		3H-1343-3H(4	=11-1	
Owner's Address (if di	fferent from above):					
		2				
Name of Agent				Tolonhono		
	-			Telephone Telephone		
	JIRED FOR PROCESSI			retopriorie		
3. Descriptive literature 1. Approxlmate dates o 5. Has applicant previo	e and/or samples of prop of project commencemen ously applied for a Certifle	oroperty. Show all elevations open materials (roofing, sidin at	g, windows, and project No □ Yes	etc.) t completion If yes, when?		
ESCRIPTION OF WO	SRK (Please check all ap	propriate categories):				
Historical Restoratio		☐ Garage	e   [	☐ New Construct	lon	
Addition	1111010101011	☐ Steps		□ Commercial (S		
] Siding		☐ Parking/Driveway		☐ Demolition `	,	
l Fence		☐ Walks		☐ Other (please :	specify)	
l Porch		☐ Wall	=			
	dition (l			_ (helght)	(square footage)	
ETAIL DATA: Please	provide a brief written de	escription of the proposed pro	ject. (Attach	additional sheet if	needed),	
10.000		X411 11 8 0 18 0311 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			)	
PROPERTY OF THE PROPERTY OF TH						
	9-9			***************************************		

IMPORTANT: No work may differ from approved Certificate of Appropriateness.

State statutes dictate that unapproved work may be subject to fines and/or removal. Certificate of Appropriateness is valid for 12 months from date of Issue. Certificate may be renewed at the discretion of the Historic Distric Commission.

### Page 2 of 3

## **MATERIAL SPECIFICATIONS & STYLE INFORMATION**

Please check all that apply to your project and Identify existing materials and any proposed replacement materials.

ROOF	
Existing:	☐ Asphalt ☐ Slate ☐ Tile ☐ Cedar ☐ Metal ☐ Fiberglass ☐ Composite ☐ Other (specify)
Color (please sp	
Proposed:	□ Asphalt □ Slate □ Tile □ Cedar □ Metal □ Artificial Slate □ Fiberglass □ Composite □ Other (specify)
Color (please sp	pecify):
SIDING	
Existing:	Clappoord DWood Shingle DVinus Siding DAtumburg
_	☐ Clapboard ☐ Wood Shingle ☐ Vinyl Siding ☐ Aluminum Siding ☐ Masonry; stone, stucce ☐ Fiber Cement Board
i ropooda.	☐ Clapboard ☐ Wood Shingle ☐ Vinyl Siding ☐ Aluminum Siding ☐ Masonry; stone, stucco ☐ Fiber Cement Board
<b>GUTTERS &amp;</b>	LEADERS
	☐ Wood ☐ Copper Aluminum ☐ Extruding ☐ Plastic ☐ Integral with roof
	□ Wood □Copper Aluminum □ Extruding □ Plastic □ Integral with roof
Windows	
Existing:	□ Double Hung □ Casement □ Arched □ Bay □ Diamond Paned □ Picture □ Other (specify)
Multiple Panes?	□ No □Yes - Specify number of panes in Top Sash Bottom Sash
Material: I	□ Wood □ Metal □ Vinyl □ Wood clad with metal □ Wood clad with vinyl □ Fiberglass
Special Glassy	□ No □Yes - Please Specify; □Leaded □Beveled □Stained Glass □ Art glass □ Other (specify)
Proposed: [	□ Double Hung □ Casement □ Arched □ Bay □ Diamond Paned □ Picture □ Other (specify)
Material:	□ No □Yes - Specify number of panes in Top Sash Bottom Sash □ Wood □Metal □Vinyl □Wood clad with metal □Wood clad with vinyl
	□ Wood □ Interal □ Willyl □ Wood clad with hieral □ Wood clad with vinyl □ No □ Yes - Please Specify; □ Leaded □ Beveled □ Stained Glass □ Art Glass □ Other (specify)
opovial olador i	2 TO 12 TOO Thouse opening, 12 Leaded 12 Develor 12 Staffed Glass 12 Art Glass 12 Other (specing)
Shutter Style: Proposed:	□ Wood □ Composite □ Vinyl □ Plastic □ Aluminum □ Fiberglass □ Louvered □ Raised Panel □ Board & Batten □ Custom □ Wood □ Composite □ Vinyl □ Plastic □ Aluminum □ Fiberglass □ Louvered □ Raised Panel □ Board & Batten □ Custom
DOODE	
DOORS Existing:	7 Wood colld. [1Wood with windows [7] Made) and [7] Made with the
	□ Wood, solid □ Wood with windows □ Metal, solid □ Metal with windows □ No □ Yes □ Sidelite Glass: □ Plain □ Beveled/Leaded □ Frosted □ Stained Glass
	No ☐ Yes ☐ Transom Glass: ☐ Clear/Frosted ☐ Patterned ☐ Colored
	? (e.g. Strap hinges)   No   Yes (please specify)
	☐ Wood, solid ☐ Wood with windows ☐ Metal, solid ☐ Metal with windows ☐ Fiberglass, solid ☐ Fiberglass with windows
	No □Yes Sidelite Glass: □Plain □Beveled/Leaded □Frosted □ Stained Glass
Transom?	No ☐ Yes ☐ Transom Glass: ☐ Clear/Frosted ☐ Patterned ☐ Colored
Special Hardware	? (e.g. Strap hinges) □No □Yes (please specify)
<b>44545</b>	
GARAGE DOO	
	od, solld Wood with windows Metal, solid Metal with windows
Flobosed C 4400	od, solld ☐ Wood with windows ☐ Metal, solld ☐ Metal with windows ☐ Fiberglass, solld ☐ Fiberglass with windows
STEPS/PORCH	DECKING
	od □Masonry □Brick □Slate/Bluestone □Cement Slab □Composite
	od (untreated)  Pressure treated wood  Masonry  Brick  Slate/Bluestone  Cement Slab  Composite
	, ————————————————————————————————————
FENCE OR WAI	
-Existing: □ Woo	od □Wrought Iron □Steel □Stone □Brick □Cement Block □Composite □Aluminum □Vinyl
Proposed: ☐ Woo	od □Wrought Iron □Steel □Stone □Brick □Cement Block □Composite □Aluminum □ Vinyl
MALKODDO	
WALK OR DRIV	
Existing: Cem	nent
roposou. LICHIII	nent □ Macadam □ Gravel □ Brick □ Slate/Flagstone/Bluestone □ Concrete Pavers □ Other

ADDITIONAL DETAIL DATA:	
Signature of Owner of Record	Date
Signature of Applicant (if different)	Date
Signature(s) of agent(s)	Date
The following Information is to be completed by	
Date Application Received	Date of Public Hearing
Inspected Prior to Hearing	Commissioners
Inspection upon Completion	Commissioners
2. DENIED (Reasons)	
	Signature of HDC Administrator
orare statutes dictate that unapproved work may be en	r from approved Certificate of Appropriateness.  bject to fines and/or removal. Certificate of Appropriateness is valid for  be renewed at the discretion of the Historic Distric Commission.

## **NOTES TO PROPERTY OWNERS:**

## NEED HELP COMPLETING THIS FORM?

If you have questions about how to complete this application form, please contact the Director of Land Use and Construction Review at City Hall or call (203) 576-7222. Historic district commissioners may also be available to assist you and answer questions.

IMPORTANTII Your project may be eligible for the Connecticut Historic Homes Rehabilitation Tax Credit.

This program provides a thirty percent tax credit up to \$30,000 per dwelling unit for the rehabilitation of 1-4 family buildings. After completion of rehabilitation work, one unit must be owner-occupied for a period of five years. A minimum of \$25,000 in qualified rehabilitation expenditures is required to qualify.

The owner must submit a detailed application for approval prior to commencement of work. Application forms can be obtained from the Connecticut Commissioner on Culture & Tourism, Historic Preservation and Museum Division, 59 South Prospect Street, Hartford, CT 06106 or by calling (860) 566-3005.



# Connecticut Commission on Culture & Tourism Historic Preservation & Museum Division



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Connecticut Commission on Culture & Tourism - Historic Preservation and Museum Division One Constitution Plaza Second Floor Hartford, CT 06103 860-256-2800 860-256-2811 (fax)



#### HISTORIC PRESERVATION TAX CREDIT PROGRAM

Connecticut General Statutes Section 10-416b establishes a tax credit for the conversion of historic commercial and industrial buildings solely to mixed residential and nonresidential uses. Residential units can be rental or for sale (that is, condominiums). To qualify, a minimum of 33 1/3 percent of the square footage after rehabilitation must be residential in use. Nonresidential uses include commercial, institutional, governmental or manufacturing. An additional tax credit is available for projects which include affordable housing.

- 25% tax credit of the total qualified rehabilitation expenditures
- 30% tax credit of the total qualified rehabilitation expenditures if the project includes an affordable housing component provided at least 20% of the rental units or 10% of for sale units qualify under CGS Section 839a.
- qualified rehabilitation expenditures are hard costs associated with rehabilitation of the certified historic structure; site improvements and nonconstruction costs are excluded
- buildings must be listed on the National or State Register of Historic Places, either Individually or as part of an historic district
- state tax credits may be combined with the 20% federal historic preservation tax credits provided the project qualifies under federal law as a substantial rehabilitation of depreciable property as defined by the Internal Revenue Service
- \$50 million in tax credit reservations are available in three year cycles
- per building cap is up to \$5 million in tax credits
- tax credit vouchers are issued after completion of rehabilitation work or, in phased projects, completion of rehabilitation work to an identifiable portion of the building placed in service for residential use
- tax credits are available for the tax year in which the building or, in phased projects, an identifiable portion of the building is placed in service for residential
- tax credits can only be used by C corporations with tax liability under Chapters 207 through 212 of the Connecticut General Statutes
- tax credits can be assigned, transferred or conveyed in whole or in part by the owner to others

The program is administered by the Connecticut Commission on Cuiture & Tourism. There is a five step application process"

Part 1, "Determination of Historic Structure Status," Form ITC 100

Part 2, "Request for Approval of Proposed Rehabilitation Plan," Form ITC 100a Part 3, "Request for Preliminary Certification and Reservation of Tax Credits," Form ITC 100c

Part 4, "Request for Final Certification of Completed Rehabilitation," Form ITC 100d

Part 5, "Request for Issuance of Tax Credit Voucher," Form 100e.

Prior approval of rehabilitation work is required.

#### FOR FURTHER INFORMATION

Connecticut General Statutes Section 10-416b Program Regulations

#### **HOW TO APPLY**

Owners seeking tax credits under the Historic Structures Rehabilitation Tax Credit Program are required to file applications with the Commission. Proposed, ongoing and completed rehabilitation work to the historic building must meet the Standards for Rehabilitation established by the Connecticut Commission on Culture & Tourism. Prior approval of proposed rehabilitation work is required for a reservation of tax credits.

Application instructions and forms are available in PDF format:

INSTRUCTIONS 001.pdf

APPLICATION FORMS 001.pdf

Each application form is to be filed separately.

#### **QUESTIONS?**

Contact: Julie Carmelich at julie.carmelich@ct.gov or call (860) 256-2762.

Printable Version

Contact Us Directions CT.Goy Staff Login

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