

For Staff Use Only

HDBR Meeting Date: _____

Action: HDBR/Staff COA
 HDBR Extended
 HDBR/Staff Denied
 Sent to HDBR by Staff

Date Received: _____

Application Requirements

All exterior changes visible from the public right-of-way (streets/alleys) within the Madison Historic District requires a Certificate of Appropriateness (COA). Applications must be complete before the HDBR or Staff can begin the review process. Submit this application form, all supplemental documentation as required (see page 2), and the application fee.

Application Deadline

Applications for January-November are due by 4:00 p.m. on the first Monday of the month. Applications for December are due by 4:00 p.m. on the fourth Monday of November.

Application Submission

Return one copy of this completed application, application fee, and all supporting documents to:

City of Madison, IN
Office of Historic Preservation
101 W. Main St., Madison, IN 47250
Phone: (812) 274 - 0283
Fax: (812) 265 - 3349

Email: preservation@madison-in.gov

A fee is not required for Staff review projects. Please check with staff before writing a check. The application fee (payable by cash or check made out to Madison City Plan Commission) is \$15.00 for projects which require HDBR Review and \$2.00 for each notification sign.

Application Hearing

Complete applications submitted by the deadline will be heard before the Madison Historic District Board of Review at their regular meeting held every fourth Monday of January—November and on the third Monday of December. The meetings are at 5:30 p.m. in the City Hall, 101 W Main St, Madison, IN 47250.



Application for Certificate of Appropriateness (COA)

City of Madison, IN
Historic District Board of Review

Project Information

Address of property for proposed work: 601 W Main St
(Street Number - Street Name)

Type of Project (Check all that apply):

- | | |
|---------------------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> New Building | <input checked="" type="checkbox"/> Sign |
| <input type="checkbox"/> Addition to Building | <input type="checkbox"/> Relocating a building |
| <input type="checkbox"/> Rebuilding, Restoration, Rehabilitation, Remodel | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Fence or Wall | <input type="checkbox"/> Other _____ |

Contractor: Kevin Carlson

***Applicant Mailing Address:**

Name(s): Teresa Waller

Mailing Address: 1006 W Main St, Madison, IN 47250
(Street Number - Street Name - City - State - Zip Code)

Phone Number: 812-701-1378 Email Address: studiobemadison@gmail.com

Owner Mailing Address:

Name(s): John and Kim Nyberg

Mailing Address: 416 West Street
(Street Number - Street Name - City - State - Zip Code)

Phone Number: 812-801-9863 Email Address: kfnyberg@gmail

*Note: If the applicant is not the owner, the legal notice and notification signage will include both the Applicant's name and the Owner's Name. Applicants must have owners permission to do proposed work.

Please read the following statements. Your signature below acknowledges that you have read the statements and attest to their accuracy:

- I understand that the approval of this application by City Staff or the HDBR does not constitute approval of other federal, state, or local permit applications.
- I understand that I (or my representative) will need to attend the HDBR Hearing. If no representation is present at the meeting, the application will be deemed incomplete and will be placed on the next month's agenda.
- I have reviewed the City of Madison's "Historic District Guidelines" in preparing this Application.

Teresa Waller 8/21/20
Signature of Applicant/Owner Date

Application for Certificate of Appropriateness (COA) Page - 2

City of Madison, IN
Historic District Board of Review

Required Supporting Documents

The following list includes the supporting documents necessary for review of a particular project. For site plans all four (4) setbacks from property line MUST be labeled. Only one (1) copy of each supporting document is necessary.

Repair, Replace, or Repair/Replace:

- Structure Plan - Elevations (Only required if making changes to openings or adding/removing features)
- Site Plan MUST have all four (4) setbacks labeled. (Only if changing footprint)
- Photographs (current/proposed) with captions
- Samples/brochures

New Buildings and New Additions:

- Structure Plan - Elevations (Only required if making changes to openings or adding/removing features)
- Site Plan MUST have all four (4) setbacks labeled.
- Floor Plan
- Photographs of proposed site and adjoining properties with captions
- Samples/brochures

Sign and Fence/Walls:

- Photograph of Existing with captions
- Sketches/Photo of proposed
- Samples/brochures
- Additional Information Sheet

Moving Buildings:

- Map showing existing location
- Map showing proposed location
- Photographs of structure with captions

Demolition:

- Photographs with captions

Project Description

If the proposed scope of work will include more than one type of project please divide the description into sections.

(Example: 1. south side, replace 2 upper wood windows with wood windows; 2. roof, replace metal roof with asphalt shingles)

Remove existing frontage sign 'Yoga On Main'.

Replace with hanging sign (36"square) with new name 'Studio be'.

Paint front door black with white trim, paint frontage board (above windows) black with white icons and lettering.

Remove building number letters.

Paint building number in transom window.

Color scheme: black with white letters

Paint the wood trim above the windows black, with white lettering.

Continued on additional sheet

Application for Certificate of Appropriateness (COA) Page - 3

City of Madison, IN
Historic District Board of Review

Check all that apply	Building Element	Guideline Page #	Approval Types	Existing Material	Proposed Material
<input type="checkbox"/>	Additions	Commercial: 62-63 Residential: 68	HDBR		
<input type="checkbox"/>	Awnings	Commercial: 34-35 Residential: 35	STAFF		
<input type="checkbox"/>	Brickwork/Masonry	Commercial: 36-39 Residential: 36 - 37	HDBR/STAFF		
<input type="checkbox"/>	Chimneys	Commercial: -- Residential: 38	HDBR/STAFF		
<input type="checkbox"/>	Deck	Commercial: 60 Residential: 64	HDBR/STAFF		
<input type="checkbox"/>	Demolition	Commercial: 71-72 Residential: 80-81	HDBR		
<input type="checkbox"/>	Doors & Entrances	Commercial: 40-42 Residential: 39-42	HDBR/STAFF		
<input type="checkbox"/>	Fences and Walls	Commercial: -- Residential: 73	STAFF		
<input type="checkbox"/>	Fire Escapes & Staircases	Commercial: 43 Residential: 43	HDBR/STAFF		
<input type="checkbox"/>	Foundations	Commercial: -- Residential: 44	HDBR/STAFF		
<input type="checkbox"/>	Garages & Outbuildings	Commercial: -- Residential: 45	HDBR/STAFF		
<input type="checkbox"/>	Gutters & Downspouts	Commercial: 44 Residential: 46	STAFF		
<input type="checkbox"/>	Infill Buildings and New Construction	Commercial: 64-66 Residential: 69-71	STAFF		
<input type="checkbox"/>	Lighting	Commercial: 45 Residential: 47	HDBR/STAFF		
<input type="checkbox"/>	Pools, Fountains, Gazebos and Pergolas	Commercial: -- Residential: 75	STAFF		
<input type="checkbox"/>	Porch Columns & Railings	Commercial: -- Residential: 51-52	HDBR/STAFF		
<input type="checkbox"/>	Porches	Commercial: -- Residential: 49-50	HDBR/STAFF		
<input type="checkbox"/>	Ramps and Lifts	Commercial: 61 Residential: 65-67	HDBR/STAFF		
<input type="checkbox"/>	Roofs	Commercial: 47 Residential: 53-54	HDBR/STAFF		
<input type="checkbox"/>	Shutters	Commercial: -- Residential: 55	HDBR/STAFF		
<input type="checkbox"/>	Siding	Commercial: -- Residential: 56-58	HDBR/STAFF		
<input checked="" type="checkbox"/>	Signs	Commercial: 48-51 Residential: 59	STAFF	wood	wood
<input type="checkbox"/>	Storefronts	Commercial: 52-55 Residential: --	HDBR/STAFF		
<input type="checkbox"/>	Storm Doors and Storm Windows	Commercial: 40-42, 56-59 Residential: 39 - 42, 60 - 63	STAFF		
<input type="checkbox"/>	Utilities	Commercial: 70 Residential: 78	STAFF		
<input type="checkbox"/>	Windows	Commercial: 56-59 Residential: 60-63	HDBR		
<input type="checkbox"/>	Other: _____		HDBR/STAFF		

Additional Information for Certificate of Appropriateness (COA) Application



MADISON HISTORIC DISTRICT BOARD OF REVIEW CITY OF MADISON, IN OFFICE OF HISTORIC PRESERVATION

101 W. Main St., Madison, IN 47250

<http://www.madison-in.gov/Index.aspx?NID=169>

Phone: (812) 274 - 2750

Fax: (812) 265 - 3349

Email: preservation@madison-in.gov



ADDITIONAL INFORMATION SHEET

Sign Information

Sign size: 36" x 36" (hanging sign), flat structure is existing strip of wood that runs the length of the facade. _____

Sign letter size: to fit _____

Dimension of building face: _____

Sign message: Studio be (hanging sign and on door glass) _____

Signage above door: 'a space to breathe, drum, ring, sing, heal, create, meditate' _____

Sign materials: Please list sign materials. _____

wood and metal _____

Sign installation:

- | | |
|--------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Flat on structure | <input type="checkbox"/> Above door/window |
| <input type="checkbox"/> At right angle | <input checked="" type="checkbox"/> On glass window |
| <input type="checkbox"/> Beside door | <input type="checkbox"/> Other |

Please explain other: _____

ADDITIONAL INFORMATION SHEET

Fence Information

Fence height: _____

Fence length: _____

Fence materials: Please list fence materials. _____

Gate(s) and gate material(s): Please include number of gates and the material for each gate. If there will be no gates please put 0 (zero). _____

Fence installation:

- | | |
|--------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> On a plinth | <input type="checkbox"/> With posts in concrete |
| <input type="checkbox"/> In-ground | <input type="checkbox"/> Other |

Please explain other: _____

8/21/20

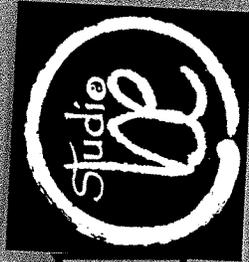
Paint scheme and signage for 601 W Main Street, Madison IN 47250

Tenant: Julie Rubio, owner, Yoga On Main: 812-701-4446

Teresa Waller, co-manager of the space: 812-701-1378 studiobemadison@gmail.com

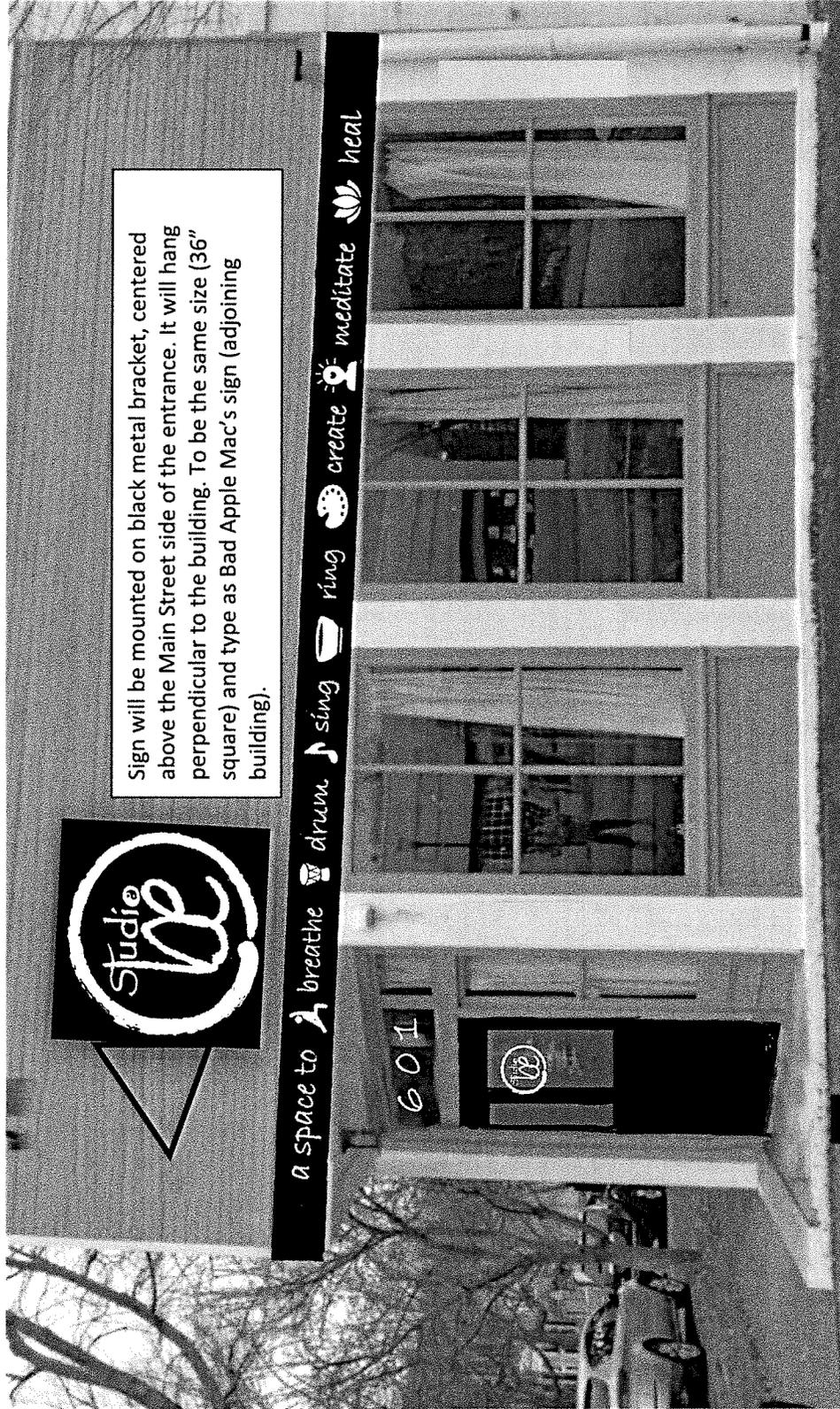
Building management contact: Kim Nyberg 812-801-9863 kfnyberg@gmail.com

Painting contractor: Kevin Carlson 812-79-01-3993 carslonart@live.com



Sign will be mounted on black metal bracket, centered above the Main Street side of the entrance. It will hang perpendicular to the building. To be the same size (36" square) and type as Bad Apple Mac's sign (adjoining building).

a space to breathe  drum  sing  ring  create  meditate  heal



Submission Date

OFFICE USE ONLY

Meeting Date

NA

Application Address: 601 W Main St

HDBR Staff Has Reviewed Packet: [Signature] Date Reviewed: 8/24/2020

Approval Type <input type="checkbox"/> HDBR <input checked="" type="checkbox"/> Staff	HD Type <input type="checkbox"/> Contributing <input type="checkbox"/> Non-Contributing	Survey Form Number _____	Construction Date _____	Building Type _____
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HDBR Staff Notes:
Signs meet guidelines/ordinance

Zoning Staff Has Reviewed Packet: _____ Date Reviewed: _____

Zoning <input type="checkbox"/> HDR <input type="checkbox"/> LB <input type="checkbox"/> R-8 <input type="checkbox"/> GB <input type="checkbox"/> RA <input type="checkbox"/> M-1 <input type="checkbox"/> RMH <input type="checkbox"/> M-2 <input type="checkbox"/> CBD <input type="checkbox"/> OS <input type="checkbox"/> SD	BZA Approval Needed <input type="checkbox"/> CUP <input type="checkbox"/> Variance <input type="checkbox"/> N/A BZA Approval Received <input type="checkbox"/> CUP <input type="checkbox"/> Variance <input type="checkbox"/> N/A	Structure Type <input type="checkbox"/> Conforming <input type="checkbox"/> Non-Conforming	Uses Current: _____ Proposed: _____
Zoning Staff Notes: _____ _____ _____			

Building Inspector Has Reviewed Packet: [Signature] Date Reviewed: 8-24-20

Building Permit Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Main Contractor _____
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Building Inspector Notes: _____
