
CERTIFICATE OF APPROPRIATENESS (REGULAR) APPLICATION FORM

**City of Vero Beach Planning & Development Department
1053 20th Place – P.O. Box 1389, Vero Beach, Florida 32961-1389
Phone (772) 978-4550 / Fax (772) 778-3856**

[To Be Completed By Staff: Date Received _____ Application # _____]

PLEASE NOTE: Prior to completion of this application please refer to the Code of the City of Vero Beach Florida, Chapter 76, Historic Preservation, Article IV, Certificate of Appropriateness.

Name of Applicant _____ Phone _____

E-Mail _____

Mailing Address _____

Name of Property Owner (if different) _____

Property Address _____

Description of Proposed Alteration(s) (attach description as necessary) _____

Building Information (year of construction) _____

Use of Building (i.e. residential or commercial) _____

Applicant Signature/Date

Property Owner Signature/Date

To Be Completed By Staff:

_____ Application Approved

_____ Application Not Approved

_____ Application approved with the following conditions: _____

Planning and Development Director Signature

Date