

## APPLICATION FOR BAR ADMINISTRATIVE APPROVAL OF SIGNS IN THE HISTORIC DISTRICTS

Administrative approval of signs by the Board of Architectural Review (BAR) Staff must meet the requirements of the [Criteria and Standards for Administrative Approval of Signs in the Historic District](#). Upon reviewing an application for administrative approval, BAR Staff may determine that a full application must be made and heard at a public hearing before the BAR and cannot be administratively approved.

**PROJECT ADDRESS:** \_\_\_\_\_

**APPLICANT:**  Property Owner  Business (Please provide business name & contact person)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**AUTHORIZED AGENT** (if applicable):  Attorney  Architect  \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**LEGAL PROPERTY OWNER** (if different from above):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

- Yes**  **No** Has the legal property owner approved the proposed signage?  
 **Yes**  **No** Is there an historic preservation easement on this property?  
 **Yes**  **No** If yes, has the easement holder agreed to the proposed signage and alterations?

*If you answered yes to any of the above, please attach a copy of the letter approving the project.*

### CHECKLIST OF SUBMITTAL REQUIREMENTS:

- Photograph(s) of the building showing existing conditions and the context of the building, including any existing signs.
- Dimensioned drawings of the proposed sign(s) and existing sign(s) to remain identifying the materials, color, lettering style, and text.
- Means of attachment (drawing or manufacturer's cut sheet of bracket, if applicable) and location on the building where the sign(s) will be installed, including the height above the sidewalk if a hanging sign is proposed.
- If lighting is proposed, a description, including a manufacturer's cut sheet, for any new lighting fixture(s) and how it will be attached to the building.

*Staff may request additional information as necessary to evaluate the application.*

**REQUIRED INFORMATION:**

Building or storefront frontage (linear feet): \_\_\_\_\_

Area of proposed sign (square feet): \_\_\_\_\_

Area of 2<sup>nd</sup> proposed sign (if applicable): \_\_\_\_\_

Secondary frontage (linear feet - for corner buildings only): \_\_\_\_\_

Area of 3<sup>rd</sup> proposed sign (for corner buildings only): \_\_\_\_\_

Number of existing signs to remain: \_\_\_\_\_

Total area of existing signs to remain (square feet): \_\_\_\_\_

**PLEASE READ & CHECK THAT YOU AGREE TO THE FOLLOWING:**

- As the applicant or authorized agent, I have submitted the \$110 filing fee with this application. (Checks made payable to the City of Alexandria.)
- As the applicant or authorized agent, I must acquire all necessary and required permits through Code Administration (703)-746-4200.
- For signs projecting into the public right-of-way, I understand that the owner shall obtain and maintain a policy of general liability insurance in the amount of \$1,000,000 which will indemnify the owner (and all successors in interest); and the City as an additional named insured, against claims, demands, suits and related costs, including attorneys' fees, arising from any bodily injury or property damage which may occur as a result of the encroachment. (Sec. 5-29 (h)(1)) (T&ES). Please submit Insurance Certificate to:

City of Alexandria  
T&ES  
Attn: Kimberly Merritt  
301 King Street, Room 4130  
Alexandria, VA 22314  
(703)-746-4056

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The undersigned hereby attests that all of the information herein provided is true, correct and accurate. The undersigned further understands that, should such information be found incorrect, any action taken by the Board or BAR Staff acting on behalf of the Board based on such information may be invalidated. The undersigned also hereby authorizes the City Staff and members of the BAR to inspect this site as necessary in the course of research and evaluating the application. The applicant, if other than the property owner, also attests that he/she has obtained permission from the property owner to make this application.

**APPLICANT OR AUTHORIZED AGENT:**

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_