



**OKLAHOMA**

STATE OF OKLAHOMA  
CAPITOL-MEDICAL CENTER IMPROVEMENT AND ZONING COMMISSION

APPLICATION FOR  
HISTORIC PRESERVATION REVIEW  
(CERTIFICATE OF APPROPRIATENESS)

Submittal Packet

**Applicable Districts and Landmarks:**

Capitol-Lincoln Terrace Historic District  
Governor's Mansion  
Lincoln Terrace East Historic District  
Maywood Presbyterian Church (Oklahoma Department of Commerce)  
Wilson-Harn Historic District

**Staff Contact:**

Beverly Hicks, Administrative Coordinator  
405-522-0440  
[beverly.hicks@omes.ok.gov](mailto:beverly.hicks@omes.ok.gov)

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## BEFORE YOU START YOUR APPLICATION

Before submitting an application, you are encouraged to review the [administrative rules and Historic Preservation Standards and Guidelines for the Capitol-Medical Center Improvement and Zoning Commission](#), and to discuss your project with the commission's staff. Staff contact information is located on the cover sheet.

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## APPLICATION SUBMITTAL

- Applications must be submitted by [established application deadlines](#).
- Submit the completed application and all required documentation, as described on page 3 of this document. Initial submittals may be made in person, by mail, or email to Beverly Hicks, Administrative Coordinator.
  - By mail: P.O. Box 53448, Oklahoma City, OK 73152
  - In person: 2401 N. Lincoln Blvd. (Will Rogers Building), Suite 126, Oklahoma City. **You are encouraged to call prior to arrival to ensure staff is available to meet with you.** Visitor parking is located in the west parking lot.
  - By email: [beverly.hicks@omes.ok.gov](mailto:beverly.hicks@omes.ok.gov).
- Staff will determine whether the project is subject to review by staff or by the Historical Preservation and Landmark Board of Review.
- Currently, there are no fees associated with applying for a Certificate of Appropriateness from the commission.

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## APPLICATION REVIEW

- Within five days after the application deadline, staff will contact the applicant to request additional information, if necessary. Staff will inform the applicant of the cutoff date for submittal of the requested information.
- If requested information is not provided by the cutoff date, it may result in delay of review and approval.
- Applications may be reviewed by staff or by the board, depending on the scope of the work proposed.

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## REVIEW AND DECISION BY THE BOARD OF REVIEW

- Applicants, project representatives and/or property owners are required to attend this public meeting in order to respond to questions that may affect approval of the request.
- If no representative is present to answer questions, the board may continue or deny the request.
- The board may request additional information in order to make a fully informed decision, in which case the application may be continued to a future meeting date.
- Additional information will not be accepted at the board public meeting.
- Board meetings are generally held on the first Thursday of each month at 4:00 p.m. in the Innovation and Create Conference Rooms on the 2<sup>nd</sup> floor of the Will Rogers Building, 2401 N. Lincoln Blvd., Oklahoma City. Please check with staff to confirm the meeting date for your application.

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## POST MEETING/DECISION

- A letter confirming the Board's decision will be issued five (5) business days after the Board meeting. Any work done prior to issuance of a Certificate of Appropriateness is considered a zoning violation.
- Your project may require additional permits from the commission and/or from the City of Oklahoma City. Please keep copies of your approval documentation for your records and provide a copy to the City of Oklahoma City for any required City-issued permits.

## SUPPORTING DOCUMENTS

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### PURPOSE

The purpose of the documentation is to illustrate what the property looks like now, what work is proposed, and what the property would look like after the proposed work is completed. Please consult staff if you have questions about how to adequately document your request.

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### DRAWING STANDARDS

1. Scale
  2. North arrow/directional reference
  3. Property Lines
  4. Specification of materials
  5. Dimensions
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### MINIMUM REQUIRED DOCUMENTS

- A. **Scope of work** – A written description of each proposed work item must be included on the application form itself. Additional pages may be attached if more detail is necessary.
- B. **Documentation of existing conditions** – Documentation of the appearance, condition and dimensions of any existing materials to be replaced or altered must be submitted.
  - a. Clear photographs of each work item
  - b. Drawings or labeled photographs with accurate dimensions and materials
- C. **Site plans** for existing and proposed work as follows:
  - a. Buildings, including garages
  - b. Fences, fence walls and retaining walls
  - c. Sidewalks and driveways
  - d. Landscape elements, including decks, sheds, etc.
- D. **Elevations, floor and roof plans**, including existing and proposed features and elements:
  - a. Exterior materials and architectural elements
  - b. Doors, windows, awnings and light fixtures
  - c. Porches, stoops, steps, ramps and railings
  - d. Roof plan showing ridgelines, chimneys, vents, gutters, etc.
- E. **Construction methods and materials**
  - a. Roof features, including chimneys, turbines, vents, gutters, etc.
  - b. Brick/masonry color, size and pattern
  - c. Siding profile, dimensions and reveal
  - d. Foundation material, dimensions and features
- F. **Products**
  - a. Cut sheet or brochure of any commercial product to be used, with dimensions, materials and color
  - b. Photographs or drawings of custom products to be used, with dimensions, materials and color (no photo paper)
- G. **Additional documentation for new construction or additions**
  - a. Floor height, with comparison to neighboring properties and primary structure (additions)
  - b. Total height, with comparison to neighboring properties and primary structure (additions)
  - c. Site plan with setbacks and siting of neighboring properties
  - d. Topographical information for existing site and any proposed changes

#### TYPICAL DOCUMENTATION REQUIREMENTS BY PROJECT TYPE

1. Roof replacement: A, B, C, E and F
2. Siding replacement: A, B, C, E and F
3. Fence replacement: A, B, C, E and F
4. Yard elements (sheds, decks, etc.): A, B, C, D, E and F
5. New construction: All
6. Additions: All
7. Window replacement: See window requirements

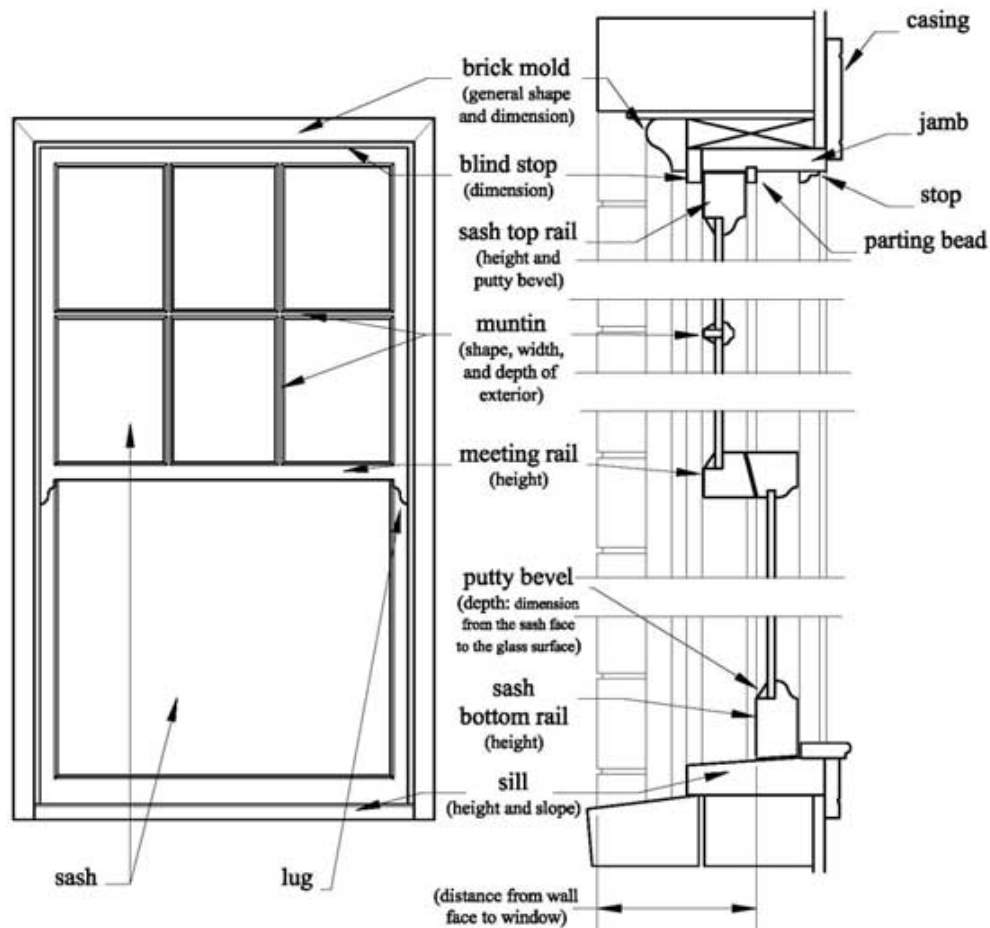
## EXAMPLE (Required Documentation for Proposed Window Replacement)

Applicants are encouraged to repair and retain existing historic windows. In some cases, replacement windows may be justified. For proposed projects that include window replacement, the following documentation must be provided:

1. **Documentation of the reason for replacement:** Photographs and written description showing that windows are beyond repair, or explanation that existing windows are not historic.\*
2. **Clear photographs of all existing window types, printed on regular 8.5" x 11" paper.** When windows are boarded over, remove boards from typical windows in order to take photographs.
3. **Drawings or measured photos** illustrating dimensions and profile of components of all existing window types, including the head, jamb, sill and muntins (see Figure 1).\*\*
4. **Wall section drawings** illustrating the horizontal and vertical sections of all existing\*\* and proposed replacement windows. These drawings should include proposed head, jamb, sill, and muntin section details, and relationship of the frame (if being replaced) to the wall (see Figure 2).
5. **Manufacturer's specifications** for proposed replacement windows, including materials and any glass treatments, such as low emissivity (Low-E) coating, levels of reflectivity, and visible light transmittance.

\*When historic windows do not exist, section drawings of proposed replacement windows should still be provided. For information about appropriate window design in this case, contact commission staff.

\*\*Wall section drawings illustrating existing windows are preferred but labeled photos showing the same information as would be included in the wall section drawings are acceptable.



Applicable Administrative Rules: [OAC 120:10](#)
**PROPERTY INFORMATION (To be completed by applicant)**

I (we), the undersigned owners of the following described property, respectfully apply to the Capitol-Medical Center Improvement and Zoning Commission for a certificate of appropriateness for the construction, addition, demolition, or exterior alteration of a structure or improvement on the property. In support of the application, the following facts are shown:

**LOCATION OF PROPERTY AND LEGAL DESCRIPTION:**

\_\_\_\_\_  
*Address* \_\_\_\_\_ *City* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

\_\_\_\_\_  
*Addition* \_\_\_\_\_ *Block* \_\_\_\_\_ *Lot(s)* \_\_\_\_\_

\_\_\_\_\_  
*Legal Description (un-platted land only)*

**PROPOSED WORK:**

Itemized Description of Proposed Work:

(List each item proposed. Work not listed here will NOT be reviewed. Attach additional pages as necessary.)

Is federal funding, a federal license, or a federal permit included/required for any part of this project?  Yes  No

If yes, what federal agency? \_\_\_\_\_

Is the property owner pursuing Federal or State Tax Credits for Rehabilitation of income producing historic properties?  Yes  No

(For information on the federal tax credit program, contact the State Historic Preservation Office at 405-522-4479 or view the SHPO website: <https://www.okhistory.org/shpo/taxcredits>)

**AUTHORIZATION:**

I hereby certify that all above statements and statements contained in all attached and transmitted exhibits are true to the best of my knowledge and belief. In the event that this proposal is approved and begun, I agree to complete the changes in accordance with approved plans in a good and workmanlike manner. I authorize the State of Oklahoma to enter the property for the purpose of observing and photographing the project for presentations and to ensure consistency between the approved proposal and the completed project. I understand that my proposal may require additional approvals/permits from the State of Oklahoma and/or the City of Oklahoma City.

**APPLICANT:**

\_\_\_\_\_  
*Applicant Owner/Agent Signature* \_\_\_\_\_ *Date Signed* \_\_\_\_\_ *Applicant Printed Name* \_\_\_\_\_

\_\_\_\_\_  
*Applicant Street Address* \_\_\_\_\_ *City* \_\_\_\_\_ *ZIP code* \_\_\_\_\_

\_\_\_\_\_  
*Applicant Phone Number* \_\_\_\_\_ *Applicant Email* \_\_\_\_\_

**REPRESENTATIVE (if applicable):**

\_\_\_\_\_  
*Representative Signature* \_\_\_\_\_ *Date Signed* \_\_\_\_\_ *Representative Printed Name* \_\_\_\_\_

\_\_\_\_\_  
*Representative Phone Number* \_\_\_\_\_ *Representative Email* \_\_\_\_\_