

**CERTIFICATE OF APPROPRIATENESS**

**Town of Mount Gilead**

**Historic Preservation Commission**

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**Date Issued:**

**Certificate No:**

The proposed improvements to the property located in the HD-Downtown Historic Overlay district have been reviewed by the Mount Gilead Historic Preservation Commission and have been found to conform to the guidelines set forth in the Article 14 of the Mount Gilead Zoning Ordinance.

This certificate is valid for 6 months from the date of issue set forth above and shall expire if no work has been commenced by that time.

**Approval Certification:**

The undersigned certifies that all work covered under this certificate has been completed in accordance with any special conditions or modifications issued by the Mount Gilead Historic Preservation Commission.

\_\_\_\_\_ Date \_\_\_\_\_  
Chairman, Mount Gilead Historic Preservation Commission

**Authorized Agent Form**

I, \_\_\_\_\_  
Do hereby appoint \_\_\_\_\_ as my duly  
authorized agent to act and speak for me before the Mount Gilead Historic  
Preservation Commission on the following matters:

\_\_\_\_\_ Date \_\_\_\_\_  
Authorized Signature

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_