



**APPLICATION for CERTIFICATE of APPROPRIATENESS – SATELLITE DISHES**

**Kalamazoo Historic District Commission**  
Community Planning & Development Department  
445 W. Michigan Avenue, Suite 101  
Kalamazoo, MI 49007  
Phone (269) 337-8804  
Fax (269) 337-8513  
cpd@kalamazoocity.org

See instructions on second page. Always apply for and obtain your Certificate of Appropriateness BEFORE purchasing materials for your project.

Property Address \_\_\_\_\_ Historic District \_\_\_\_\_

OWNER: Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Fax \_\_\_\_\_ Email \_\_\_\_\_

APPLICANT: Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_  
Fax \_\_\_\_\_ Email \_\_\_\_\_

PROPOSED WORK: (Please be as specific as possible including a complete description of the part of the structure where dish will be installed. See examples on next page. Use additional sheets to describe work if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INITIALS:**

[ \_\_\_\_ ] Please initial to verify at least one working smoke detector in each dwelling unit. As required by state law, this item must be initialed for the application to be considered complete.

**IMPORTANT:**

Submissions received by the Community Planning & Development Department by 5:00pm on the second Tuesday of the month will be considered the following Tuesday at the HDC's monthly meeting. Electronic submissions are preferred; hard copy submissions are acceptable.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>Staff use only:</b>	Case number	_____	Application complete	____/____/____
Administrative	Staff review date	____/____/____	COA issued	____/____/____
HDC	Meeting Date	____/____/____	Approval in Concept	____/____/____
	Letter mailed	____/____/____		
Final HDC Action	Action date	____/____/____		

[ ] Approve [ ] Site Visit [ ] Approve with conditions [ ] Denial [ ] Postpone [ ] Withdrawn [ ] Notice to proceed



## **INFORMATION for CERTIFICATE of APPROPRIATENESS – SATELLITE DISHES**

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### PROPOSED WORK – Examples

#1: Rather than “Install satellite dish”, indicate, “Install satellite dish on rear gable of roof.”

#2: Rather than “Install satellite dish,” indicate, “Install satellite dish behind chimney/ on chimney on rear side”

#3: Rather than “Install satellite dish,” indicate, “Install satellite dish on corner board of southwest corner of house below the edge of the eaves.”

Ideally the satellite dish will be installed

- On the building’s rear façade or the rear half of a side if wall-mounted
- Behind a chimney if this still provides optimal reception
- On a garage or outbuilding

The HDC may not deny a satellite dish installation, but it may regulate its location. If the dish cannot be installed on a part of the building shielded from public view, the applicant must provide a written document must indicate that optimal reception cannot be obtained from an installation at the rear of the building. The document should propose a specific location for installation and any reasons that the rear installation would not work.

#1: “Mature trees on the south side of the house block reception”

#2: “Adjacent houses block reception”

#3: “Post in front yard gives best reception”

### PHOTOS

Staff is responsible for taking photographs of the structure – sometimes during a meeting with applicant, but often in the days immediately before the meeting when the property is to be reviewed. If you wish to take additional photos, one set is usually adequate for the Commissioners to examine. (Hint: Photos are much easier to pass around in a photo album page.)