July 20, 2021

NOTICE OF DENIAL

Bart Rue (Majic Windows) 2016 Edison Detroit, MI 48206

RE: Application Number 21-7361; 2016 Edison; Boston Edison Historic District

Dear Mr. Rue:

At the regular meeting that was held on July 14, 2021, the Detroit Historic District ("Commission") reviewed the above-referenced application for building permit. Pursuant to Section 21-2-80 of the 2019 Detroit City Code, the Commission hereby issues a Notice of Denial for the below outlined items which is effective as of July 20, 2021. Specifically, the Commission reviewed the permit for the below-described work, and determined that it does not qualify for a Certificate of Appropriateness because it does not meet the Secretary of the Interior Standards for Rehabilitation, Standards #2) The historic character of a property shall be retained and preserved. The removal of historic materials or alteration of features and spaces that characterize a property shall be avoided, #5) Distinctive features, finishes, and construction techniques or examples of craftsmanship that characterize a property shall be preserved, #6) Deteriorated historic features shall be repaired rather than replaced. Where the severity of deterioration requires replacement of a distinctive feature, the new feature shall match the old in design, color, texture, and other visual qualities and, where possible, materials. Replacement of missing features shall be substantiated by documentary, physical, or pictorial evidence, and #9) New additions, exterior alterations, or related new construction shall not destroy historic materials that characterize the property. The new work shall be differentiated from the old and shall be compatible with the massing, size, scale, and architectural features to protect the historic integrity of the property and its environment:

The unapproved installation of windows replaced with single hung fiberglass windows.

Please be advised that a permit applicant that is aggrieved by a decision of the Detroit Historic District Commission concerning a permit application may file an appeal with the Michigan Department of Attorney General. Within sixty (60) days of your receipt of this notice, an appeal may be filed with:

Jon Stuckey
Michigan Department of Attorney General
2nd Floor G. Mennen Williams Building
525 West Ottawa Street
P.O. Box 30754
Lansing, MI 48909
P: 517-335-0665

P: 517-335-0665 F: 517-335-3088

Email: stuckeyi@michigan.gov

If you have any questions regarding the foregoing, please contact Taylor Leonard, Counsel for the Commission at (313) 237-3006.

For the Commission:

Daniel Rieden

D. Rison

Staff

Detroit Historic District Commission

THIS IS A 3-PAGE FORM - ALL INFORMATION IS REQUIRED FOR PROJECT REVIEW

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

6/01/01

City of Detroit - Planning & Development Department 2 Woodward Avenue, Suite 808 Detroit, Michigan 48226

Detroit, Michigan 48226		DATE: 0/21/21								
PROPERTY INFORMATION										
ADDRESS(ES): 2016 Edison	AKA:									
PARCEL ID: NA	D: NA HISTORIC DISTRICT: Boston-Edison									
	Walls/ Siding Painting Roof/Gutters/ Chimney Signage New Major Alteration (3+ scope items)	(landscape, trees, fences, patios, etc.)								
PRIEF PROJECT DESCRIPTION: rem remove and replace 19 windows s		or size								
APPLICANT IDENTIFICATI	ON									
Property Owner/ Homeowner NAME: Bart Rue	ntractor Tenant or Business Occupa									
ADDRESS: 30580 Beck Rd	CITY: Wixom	STATE: MI ZIP: 48393								
PHONE: 248-668-9090 MOI	BILE: 517-404-4163 EM	AIL: permits@majicwindow.com								
PROJECT REVIEW REQUE Please attach the following document *PLEASE KEEP FILE SIZE OF ENTIRE SU	ntation to your request:	,								
Completed Building Permit Appear (only a for permits through ePLANS)	Based on the scope of work, additional documentation may be required. See www.detroitmi.gov/hdc for									
Photographs of ALL sides of exist	sting building or site	I scope-specific requirements.								
Detailed photographs of location (photographs to show existing co	on of proposed work ndition(s), design, color, & material)									
Description of existing conditi	ons (including materials and design)									
Description of project (if replacementrather than repair	ting any existing material(s), include a rof existing and/or construction of ne	n explanation as to why ew is required)								
Detailed scope of work (format	tted as bulleted list)									
Brochure/cut sheets for propos	sed replacement material(s) and/or pr	oduct(s), as applicable								

Upon receipt of this documentation, staff will review and inform you of the next steps toward obtaining your building permit from the Buildings, Safety Engineering and Environmental Department (BSEtED) to perform the work.

SUBMIT COMPLETED REQUESTS TO: HDC@DETROITMI.GOV

P2 - BUILDING PERMIT APPLICATION

		D	ate:
PROPERTY INFORMATION			
Address: ZOILE Edison	Floor:	Suite#:	Stories:
AKA:			on:
Parcel ID#(s): T			
Current Legal Use of Property:	Propo	osed Use:	
Are there any existing buildings or structure			☐ No
PROJECT INFORMATION /			
Permit Type: New Alteration	n 🗆 Addition 🗀	Demolition C	Correct Violation
Foundation Only Change of Use			
Revision to Original Permit #:			
Description of Work (Describe in detail prop	oosed work and use of prop	erty, attach work list	t)
remove and rep	lace 19 wi	ndows ?	re for
size '			
	☐ MBC use	change No	o MBC use change
Included Improvements (Check all application	ble; these trade areas requi	re separate permit a	pplications)
HVAC/Mechanical Electrical	Plumbing Fir	e Sprinkler Syste	m Fire Alarm
Structure Type /			
New Building Existing Structure	Tenant Space	☐ Garage/Acc	cessory Buildina
Other: Size of Structure			
Construction involves changes to the floor			
(e.g. interior demolition or construction to new wal			
Use Group: Type of Const		dg Code Table 601)	
Estimated Cost of Construction \$			
Structure Use	By Contractor	В	by Department
Residential-Number of Units: Offic	ce-Gross Floor Area	Industrial-G	ross Floor Area
Commercial-Gross Floor Area: Instit			
Proposed No. of Employees:List mater			and the second
PLOT PLAN SHALL BE submitted on separat	te sheets and shall show	all easements an	d measurements
(must be correct and in detail). SHOW ALL s existing and proposed distances to lot lines.	treets abutting lot, indi	cate front of lot,	show all buildings,
	ng Department Use O		Next Page)
Intake By:			D
Permit Description:	Date: F	ees Due:	_ DngBld? No
. Crime Description.			
Current Legal Land Use:	Propose	d Heer	
The state of the s	Proposed		
Permit#: Date Pen Zoning District:			
	No (attach zoning clearar		
Revised Cost (revised permit applications only)			
Structural:			
Zoning:			
Other:	Date:	Notes:	

P2 - BUILDING PERMIT

IDENTIFICATION (All Fields				
Property Owner/Homeowner				
Name: David Morrisa				4
Address: 2016 Ediscr	City: <u>()</u>	etroit s	ate: MI Zip: 48200	<u>م</u>
Phone: 586-337-(2054 Mobile			<u>-</u>
Driver's License #:	Email: _			_
Contractor is				
Representative Name: Bast	Rue Com	pany Name: <u>M</u>	ajic windo	ليد
Address: 30580 Beca Phone: 248-648-9090 Mol City of Detroit License #:	City: W	ixam si	rate: <u>HT</u> Zip: <u>483</u>	393
Phone: 248-668-9090 Mol	oile: NA	Email: _ <i>Pes</i> ;	nits a majic	window.com
City of Detroit License #:	LIC 2001-C	12452		
TENIANE OF PURPLES		o Paro Labor	U/G	-
TENANT OR BUSINESS OC				
Name: Ph	one:	Email:		5
ARCHITECT/ENGINEER/CO	NSIIITANT Arc	hitect/Engineer/Co	onsultant is Permit Applicant	
Name:		A STATE OF THE STA		
Address:	City:	·	expiration Date:	-
Phone: Mo	hile	Fmail:	atezip	
HOMEOWNER AFFIDA				
I hereby certify that I am the legal on this permit application shall be requirements of the City of Detroit inspections related to the installation other person, firm or corporation a	completed by me. I am t and take full responsibil on/work herein describe	familiar with the a ity for all code co d. I shall neither h	oplicable codes and mpliance, fees and ire nor sub-contract to any	
Print Name:(Homeowner)	Signature:		Date:	
Subscribed and swom to before me t				
Signature:			Expires:	
(Notan	y Public)			-
P	ERMIT APPLICANT SI	GNATURE	California and	
I hereby certify that the information restrictions that may apply to this certify that the proposed work is a to make this application as the proposed all applicable laws and ordinances inspections are requested and continuous inspection and that Print Name: Barriage Permit Applicant Driver's License #: ROOD OB	construction and am aw uthorized by the owner operty owner(s) authorized of jurisdiction. I am aw onducted within 180 deexpired permits cannot signature: Signature: day of My Committee owner(s) authorized of the owner owner(s) authorized owner	are of my respons of the record and ed agent. Further are that a perminars of the date of	sibility thereunder. I I have been authorized I agree to conform to t will expire when no f issuance or the date of	-Z <i>i</i>
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Section 23a of the state construction code act of 1972, 1972PA230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Visitors of Section 23a are subject to civil fines.

This application can also be completed online. Visit detroitmi.gov/bseed/elaps for more information.



Windows to be installed at 2016 Edison

- 1. Bathroom 1 Single Hung 23 3/4x 33 ½ (lower obscured with 4 grids)
- 2. Bedroom 2 Single Hung 29 ¾ x 57 ½ (With 6 grids)
- 3. Bedroom 2 Single Hung 29 ¾ x 57 ½ (With 6 grids)
- 4. Bathroom 1 Single Hung 35 ¾ x 33 ½ (lower obscured with 6 grids)
- 5. Bedroom 3 Single Hung 29 3/4x 57 ½ (With 6 grids)
- 6. Bedroom 3 Single Hung 29 3/4x 57 ½ (With 6 grids)
- 7. Master Bathroom Single Hung 29 3/4x 57 ½ (With 8 grids)
- 8. Bathroom 2 Single Hung 29 3/4x 37 ½ (lower obscured with 8 grids)
- 9. Bedroom 4 Single Hung 23 ¾ x 33 ½ (With 6 grids)
- 10. Bedroom 4 Single Hung 29 ¾ x 57 ½(With 6 grids)
- 11. Bedroom 4 Single Hung 29 3/4x 57 ½ (With 6 grids)
- 12. Bedroom 4 Single Hung 29 3/4x 57 ½ (lower obscured with 4 grids)
- 13. Bathroom 3 Single Hung 35 3/4x 33 ½ (With 6 grids)
- 14. Bathroom 3 Single Hung 29 3/4x 37 ½ (lower obscured with 6 grids)
- 15. Kitchen Single Hung 41 3/4x 49 1/8 (With 6 grids)
- 16. Kitchen Single Hung 58 5/8x 46 ½ (With 6 grids)
- 17. Kitchen Single Hung 58 5/8x 46 ½ (With 6 grids)
- 18. Bedroom 1 Single Hung 29 3/4x 57 ½ (With 6 grids)
- 19. Bedroom 1 Single Hung 29 3/4x 57 ½ (With 6 grids)

All windows to be white interior and almond exterior. All windows that originally have grids will be replaced with windows that are same size and same grid style. All windows will be replaced size for size. All windows will be trimmed in Grecian Green #26 by Sherwin Williams.



Buyer:

Salesperson:

ENCHIO OFFICE (248) 668-9090 30580 BECK RD • WIXOM, MI 48393

WINDOW CONTRACT AND AGREEMENT State of MiCh I/we, the owner(s) of the premises described below (the "Buyer") contract with and authorize Majic Window Company, a Michigan corporation, ("Majic") to furnish the materials, labor, and workmanship, and to install, construct, and place the home improvements, according to the terms on the second page of this Contract and the following specifications: morrison 2020 Buyer(s) Name / Zip Email Salesperson Phone # 734 Majic to furnish and install: Location BA:1. 2 6 3 6 4 5 6 6 7 8 9 BRY 10 11 R 12 6 13 14 15 In consideration of the said provided by Majic, Buyer agrees to pay Majic as follows: THE TOTAL SUM OF: ash / CC | Due Upon Measure CK / Cash / CC Due Upon Installation: CK / Cash / CC | To Be Financed: Price given is the cash or check price; if paying by credit card, add 3%. Price includes all discounts, taxes, and fees. *Deposit is received by Majic upon execution of this Contract. Finance 4115 SAC 60 mounts in those Circle Method of Final Payment: FINAL PAYMENT DUE Cash/Check UPON COMPLETIONS Other FIFTY YEAR TRANSFERABLE GUARANTEE AGAINST ANY MANUFACTURER DEFECTS IN THE WINDOWS INCLUDING PARTS AND GLASS SEAL FAILURE. (FOR DETAILS SEE GUARANTEE) DISCLOSURE: If you live in Ohio, pursuant to Ohio Administrative Code 109:4-3-05, you, Buyer, have the right to an estimate if the expected costs will be more than twenty-five dollars. The amounts included above constitute a written estimate and a binding Contract (subject to the three-day cancellation period), and by signing this document you have chosen to receive your estimate in writing and enter into this binding Contract. Initial here if, instead, you would like an Oral Estimate: or No Estimate: ADDITIONAL WORK WILL ONLY BE PERFORMED IF IN WRITING. You, the buyer, may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the notice of cancellation on the reverse side for an explanation of this right. Additionally, the seller is prohibited from having an independent courier service or other third party pick up your payment at your residence before the end of the 3-business-day period in which you can cancel the transaction.

Buyer: _____ Date: 12/2/2020

Additional Terms & Conditions On Back.

242

OFFICE (248) 668-9090 30580 BECK RD • WIXOM, MI 48393

WINDOW CONTRACT AND AGREEMENT

State of Mich I/we, the owner(s) of the premises described below (the "Buyer") contract with and authorize Majic Window Company, a Michigan corporation, ("Majic") to furnish the materials, labor, and workmanship, and to install, construct, and place the home improvements, according to the terms on the second page of this Contract and the following specifications: MORRISON Street Cross Streets Telephone # Telephone # Salesperson Name_ Salesperson Phone # Majic to furnish and install: Location 2 6 3 4 5 6 7 8 9 10 11 12 13 14 15 Window Color: White = W Almond = A Brownstone = BS Comm. Brown = CB Slate = S Trim Color: Desert Tan = DT | Nor Wood = NW Sales Notes: In consideration of the said work and services to be provided by Majic, Buyer agrees to pay Majic as follows: THE TOTAL SUM OF: CK / Cash / CC | Due Upon Measure: *Deposit: CK / Cash / CC Due Upon Installation: CK / Cash / CC | To Be Financed: Price given is the cash or check price; if paying by credit card, add 3%. Price includes all discounts, taxes, and fees. *Deposit is received by Majic upon execution of this Contract. Circle Method of Final Payment: Finance FINAL PAYMENT DUE Cash/Check **UPON COMPLETIONS** Other FIFTY YEAR TRANSFERABLE GUARANTEE AGAINST ANY MANUFACTURER DEFECTS IN THE WINDOWS INCLUDING PARTS AND GLASS SEAL FAILURE. (FOR DETAILS SEE GUARANTEE) DISCLOSURE: If you live in Ohio, pursuant to Ohio Administrative Code 109:4-3-05, you, Buyer, have the right to an estimate if the expected costs will be more than twenty-five dollars. The amounts included above constitute a written estimate and a binding Contract (subject to the three-day cancellation period), and by signing this document you have chosen to receive your estimate in writing and enter into this binding Contract. Initial here if, instead, you would like an Oral Estimate: or No Estimate: ADDITIONAL WORK WILL ONLY BE PERFORMED IF IN WRITING. You, the buyer, may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the notice of cancellation on the reverse side for an explanation of this right. Additionally, the seller is prohibited from having an independent courier service or other third party pick up your payment at your residence before the end of the 3-business-day period in which you can cancel the transaction. Buyer: Date:

Additional Terms & Conditions On Back.

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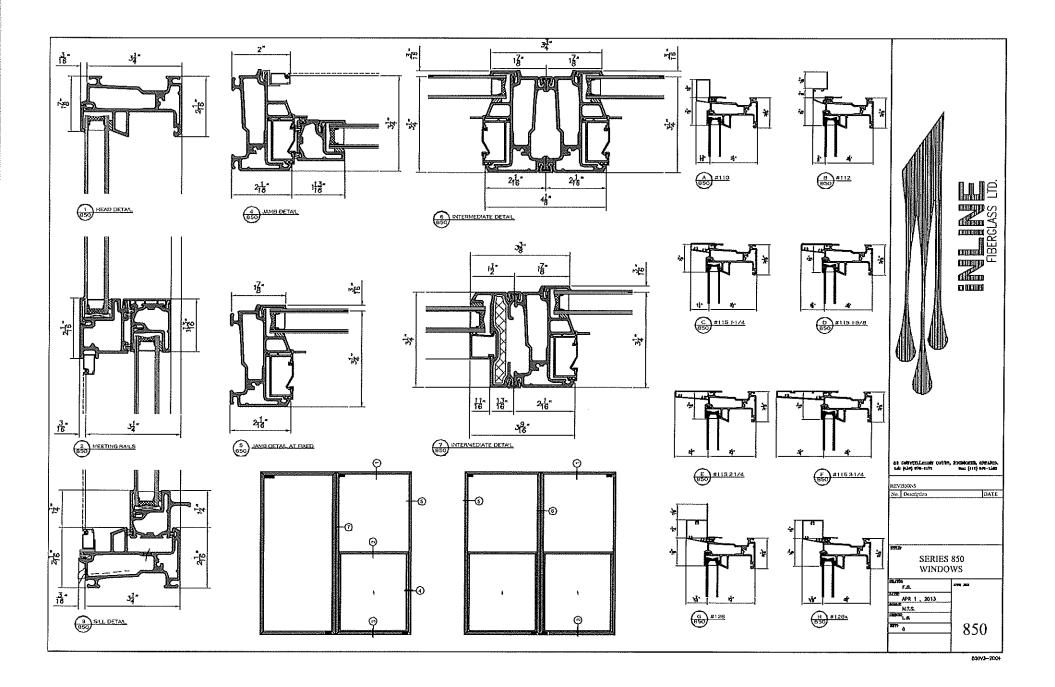




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Customer: 2016 EDISON DET.		Date:	337	6054
Customer Address:		Phone#:	901	60.39
This change order authorizes Majic Window to make the following changes in the work:				
TRIM COLOR TO BE! #AL GRECIAN GREEN \$26 WINDOWS INT WHITE EXT S32 ALMOND GRIDS 532 ALMOND EXT INT-WHITE FOR DANIEUR	Amount of of Change Am New Contra Deposit: Remaining E	ount: ct Amount	(+/-) \$ _	
(Authorized Representative)		Date:	1-21.	
WINDOW CO. (Customer's Signature)		Date:		

MORESON, DAVID	12023	65	12:	770
Customer: 2016 Edison St. Customer Address:	Detroit	Mt. 48206	Date: 56-3 Phone#	337-10054
This change order authorizes Majic Windo ADDING & 628.00 TWO TONE GREG ALMOND EXT. TO COLORS.	to contact	FOR	Amount of original C Change Amount: New Contract Amount Deposit:	O-) \$ 628 00
Manie 1 Author (Author)	Mul Helle (prized Representative)	Ea Chas Tax	Date	\$ 15.21 :
	omer's Signature)		Date	

WORK ORDER CHANGE



Colo

