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

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

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

2 Woodward Avenue, Suite 808 Detroit, Michigan 48226	Date: 11/10/20			
PROPERTY INFORMATION	DEFECTION REPORTS SERVICES I			
ADDRESS: 1124 Van Dyke	AKA:			
HISTORIC DISTRICT: West Villiage				
SCOPE OF WORK: Windows/Doors Roof/Gutters/Chimney	Porch/ Landscape/Fence/ General Rehab			
New Construction Demolition	Addition Other: painting of the exterior			
APPLICANT IDENTIFICATION				
Homeowner Contractor	Tenant or Architect/Engineer/Business Occupant Consultant NAME: 1124 Van Dyke LLC			
ADDRESS: 1124 Van Dyke CITY: Detro				
PHONE: 734-368-4022 MOBILE: 734-368-4022	EMAIL: jason.senior@banyandirect.c			
PROJECT REVIEW REQUEST CHECKLIST Please attach the following documentation to your reques *PLEASE KEEP FILE SIZE OF ENTIRE SUBMISSION UNDER	30MB*			
Completed Building Permit Application (highlight	ed portions only)			
ePLANS Permit Number (only applicable if you've a for permits through ePLANS)	I so roquirou.			
Photographs of ALL sides of existing building or site	See www.detroitmi.gov/hdc for i scope-specific requirements.			
Detailed photographs of location of proposed work (photographs to show existing condition(s), design, co				
Description of existing conditions (including mate	erials and design)			
Description of project (if replacing any existing mareplacementrather than repairof existing and/or	terial(s), include an explanation as to why construction of new is required)			
Detailed scope of work (formatted as bulleted list)				
Brochure/cut sheets for proposed replacement ma	aterial(s) and/or product(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 (BSEED) to perform the work.

SUBMIT COMPLETED REQUESTS TO HDC@DETROITMI.GOV

P2 - BUILDING PERMIT APPLICATION

			Dat	e: <u>11/10/20</u>
PROPERTY INFORMATION				
Address: 1124 Van Dyke	Flo	oor:S	uite#:	Stories: 2
AKA:				
Parcel ID#(s):				
Current Legal Use of Property: duplex		Proposed Use:	same	
Are there any existing buildings or structu				No
PROJECT INFORMATION			South Control of the	
Permit Type: New Alteration	on Addition	Demolitic	on 🔲 🤇	Correct Violations
Foundation Only Change of Use	Temporary	Use Othe	er: paintin	g of the exterior
Revision to Original Permit #:				
Description of Work (Describe in detail pro Paint the exterioir of the home.				
	MB0	C use change	∐ No N	MBC use change
	ble; these trade areas			
New Building Existing Structure	Tenant Spa	ce Gara	ige/Acces	ssory Building
Other: Size of Structu	ıre to be Demolish	ed (LxWxH)		cubic ft.
Construction involves changes to the floor	r plan?	Yes	No	
(e.g. interior demolition or construction to new wa				
Use Group: Type of Cons	struction (per current	: MI Bldg Code Ta	ble 601)	
Estimated Cost of Construction \$	By Contractor	\$	By D	epartment
Structure Use	by contractor		by b	Сранители
Residential-Number of Units: 2 Offi	ce-Gross Floor Area _			
	itutional-Gross Floor A		Other-Gross	Floor Area
Proposed No. of Employees: List mate	rials to be stored in th	e building:		
PLOT PLAN SHALL BE submitted on separa (must be correct and in detail). SHOW ALL sexisting and proposed distances to lot lines	streets abutting lot	, indicate front	of lot, sho	ow all buildings,
For Build	ing Department l	Jse Only		
Intake By:	Date:	Fees Due:		DngBld? No
Permit Description:				

IDENTIFICATION (All Fields Required) Property Owner/Homeowner is Permit Applicant Property Owner/Homeowner Company Name: 1124 Van Dyke LLC Name: Jason Senior Address: 2751 E. Jefferson City: Detroit State: MI Zip: 48207 Phone: 734-368-4022 Mobile: 734-368-4022 Driver's License #: _____ Email: jason.senior@banyandirect.com **Contractor** Contractor is Permit Applicant Representative Name: _____ Company Name: _____ Phone: _____ Mobile: ____ Email: ____ City of Detroit License #: TENANT OR BUSINESS OCCUPANT Tenant is Permit Applicant Name: _____ Phone: ____ Email: _____ **ARCHITECT/ENGINEER/CONSULTANT** Architect/Engineer/Consultant is Permit Applicant Name: _____ State Registration#: _____ Expiration Date:_____ Phone: Mobile: Email: **HOMEOWNER AFFIDAVIT** (Only required for residential permits obtained by homeowner.) I hereby certify that I am the legal owner and occupant of the subject property and the work described on this permit application shall be completed by me. I am familiar with the applicable codes and requirements of the City of Detroit and take full responsibility for all code compliance, fees and inspections related to the installation/work herein described. I shall neither hire nor sub-contract to any other person, firm or corporation any portion of the work covered by this building permit. Print Name: _____ Signature: ____ Date: ____ Subscribed and sworn to before me this 12 day of NOV 20 20 A.D. Maconb County, Michigan Signature: My Commission Expires: 9/30/2021 (Notary Public) **PERMIT APPLICANT SIGNATURE**

I hereby certify that the information on this application is true and correct. I have reviewed all deed restrictions that may apply to this construction and am aware of my responsibility thereunder. I certify that the proposed work is authorized by the owner of the record and I have been authorized to make this application as the property owner(s) authorized agent. Further I agree to conform to all applicable laws and ordinances of jurisdiction. I am aware that a permit will expire when no inspections are requested and conducted within 180 days of the date of issuance or the date of the previous inspection and that expired permits cannot be





