

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
Detroit, Michigan 48226

Date: December 4, 2020

PROPERTY INFORMATION

ADDRESS: 1531 Eighth Street AKA: _____

HISTORIC DISTRICT: Corktown

SCOPE OF WORK: (Check ALL that apply)

<input type="checkbox"/> Windows/ Doors	<input type="checkbox"/> Roof/Gutters/ Chimney	<input checked="" type="checkbox"/> Porch/ Deck	<input checked="" type="checkbox"/> Landscape/Fence/ Tree/Park	<input type="checkbox"/> General Rehab
<input type="checkbox"/> New Construction	<input type="checkbox"/> Demolition	<input type="checkbox"/> Addition	<input type="checkbox"/> Other: <u>Repair and Replacement</u>	

APPLICANT IDENTIFICATION

Property Owner/
Homeowner Contractor Tenant or
Business Occupant Architect/Engineer/
Consultant

NAME: Brian Hurtienne COMPANY NAME: _____

ADDRESS: 1531 Eighth Street CITY: Detroit STATE: MI ZIP: 48216

PHONE: 313-850-6689 MOBILE: _____ EMAIL: brian@cha-c.com

PROJECT REVIEW REQUEST CHECKLIST

Please attach the following documentation to your request:

PLEASE KEEP FILE SIZE OF ENTIRE SUBMISSION UNDER 30MB

- Completed Building Permit Application (highlighted portions only)
- ePLANS Permit Number (only applicable if you've already applied for permits through ePLANS)
- Photographs of ALL sides of existing building or site
- Detailed photographs of location of proposed work (photographs to show existing condition(s), design, color, & material)
- Description of existing conditions (including materials and design)
- Description of project (if replacing any existing material(s), include an explanation as to why replacement--rather than repair--of existing and/or construction of new is required)
- Detailed scope of work (formatted as bulleted list)
- Brochure/cut sheets for proposed replacement material(s) and/or product(s), as applicable

NOTE:

Based on the scope of work, additional documentation may be required.

See www.detroitmi.gov/hdc for scope-specific requirements.

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

Address: 1551 Eighth Street Floor: _____ Suite#: _____ Stories: _____
AKA: _____ Lot(s): _____ Subdivision: _____
Parcel ID#(s): _____ Total Acres: _____ Lot Width: _____ Lot Depth: _____
Current Legal Use of Property: Residential Proposed Use: _____
Are there any existing buildings or structures on this parcel? Yes No

PROJECT INFORMATION

Permit Type: New Alteration Addition Demolition Correct Violations
 Foundation Only Change of Use Temporary Use Other: Repair and Replacement
 Revision to Original Permit #: _____ (Original permit has been issued and is active)

Description of Work (Describe in detail proposed work and use of property, attach work list)
Reconstruct front porches. Reconstruct rear porches. Install new fence with gates. General repair.

MBC use change No MBC use change

Included Improvements (Check all applicable; these trade areas require separate permit applications)
 HVAC/Mechanical Electrical Plumbing Fire Sprinkler System Fire Alarm

Structure Type
 New Building Existing Structure Tenant Space Garage/Accessory Building
 Other: _____ Size of Structure to be Demolished (LxWxH) _____ cubic ft.
Construction involves changes to the floor plan? Yes No

(e.g. interior demolition or construction to new walls)
Use Group: R2 Type of Construction (per current MI Bldg Code Table 601) 3B

Estimated Cost of Construction \$ 80,000 By Contractor \$ _____ By Department

Structure Use
 Residential-Number of Units: 3 Office-Gross Floor Area _____ Industrial-Gross Floor Area _____
 Commercial-Gross Floor Area: _____ Institutional-Gross Floor Area _____ Other-Gross Floor Area _____
Proposed No. of Employees: _____ List materials to be stored in the building: _____

PLOT PLAN SHALL BE submitted on separate sheets and shall show all easements and measurements (must be correct and in detail). SHOW ALL streets abutting lot, indicate front of lot, show all buildings, existing and proposed distances to lot lines. (Building Permit Application Continues on Next Page)

For Building Department Use Only

Intake By: _____ Date: _____ Fees Due: _____ DngBld? No
Permit Description: _____

Permit #:

Current Legal Land Use: _____ Proposed Use: _____
Permit#: _____ Date Permit Issued: _____ Permit Cost: \$ _____
Zoning District: _____ Zoning Grant(s): _____
Lots Combined? Yes No (attach zoning clearance)

Revised Cost (revised permit applications only) Old \$ _____ New \$ _____

Structural: _____ Date: _____ Notes: _____

Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Mobile: _____
 Driver's License #: _____ Email: _____
Contractor Contractor is Permit Applicant
 Representative Name: _____ Company Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 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: _____
 Address: _____ City: _____ State: _____ Zip: _____
 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: _____
 (Homeowner)

Subscribed and sworn to before me this _____ day of _____ 20 ____ A.D. _____ County, Michigan
 Signature: _____ My Commission Expires: _____
 (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**

Print Name: _____ Signature: _____ Date: _____
 (Permit Applicant)

Driver's License #: _____ Expiration: _____
 Subscribed and sworn to before me this _____ day of _____ 20 ____ A.D. _____ County, Michigan
 Signature: _____ My Commission Expires: _____
 (Notary Public)

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

HISTORIC DISTRICT COMMISSION REVIEW & PERMIT PROCESS



* THE COMMISSION MEETS REGULARLY AT LEAST ONCE PER MONTH, TYPICALLY ON THE SECOND WEDNESDAY OF THE MONTH. (SEE WEBSITE FOR MEETING SCHEDULE/AGENDAS)

FIND OUT MORE AT www.detroitmi.gov/hdc