

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: 7/13/2021

PROPERTY INFORMATION

ADDRESS(ES): 1457 Griswold AKA: Isaac Agree Downtown Synagogue

PARCEL ID: 02002002 HISTORIC DISTRICT: Capitol Park (21-2-224)

SCOPE OF WORK: (Check ALL that apply)

| | | | | | |
|---|--|--|--|---|-----------------------------------|
| <input checked="" type="checkbox"/> Windows/ Doors | <input checked="" type="checkbox"/> Walls/ Siding | <input checked="" type="checkbox"/> Painting | <input type="checkbox"/> Roof/Gutters/ Chimney | <input checked="" type="checkbox"/> Porch/Deck/ Balcony | <input type="checkbox"/> Addition |
| <input checked="" type="checkbox"/> Demolition | <input type="checkbox"/> Signage | <input type="checkbox"/> New Building | <input type="checkbox"/> Major Alteration <i>(3+ scope items)</i> | <input type="checkbox"/> Site Improvements <i>(landscape, trees, fences, patios, etc.)</i> | |

BRIEF PROJECT DESCRIPTION: first floor. New elevator to the roof. Extended interior stairs to the roof
first floor. New elevator to the roof. Extended interior stairs to the roof. New roof deck.

APPLICANT IDENTIFICATION

Property Owner/
Homeowner

Contractor

Tenant or
Business Occupant

Architect/Engineer/
Consultant

NAME: Joel Smith, AIA COMPANY NAME: Neumann Smith

ADDRESS: 400 Galleria Officentre Suite F CITY: Southfield STATE: MI ZIP: 48034

PHONE: 2483528310 MOBILE: 2483024680 EMAIL: jsmith@neumannsmith.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)

Current Photographs: Including the front of the building & detailed photographs of the area(s) affected by
the proposed work. All photographs must be labeled or captioned, e.g. "west wall", "second floor window," etc.

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 (BSEtED) to perform the work.

SUBMIT COMPLETED REQUESTS TO: HDC@DETROITMI.GOV

P2 - BUILDING PERMIT APPLICATION

Date: 7/13/2021

PROPERTY INFORMATION

Address: 1457 Griswold Floor: _____ Suite#: _____ Stories: _____
 AKA: Isaac Agree Downtown Synagogue Lot(s): _____ Subdivision: _____
 Parcel ID#(s): _____ Total Acres: _____ Lot Width: _____ Lot Depth: _____
 Current Legal Use of Property: _____ 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: _____
 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)

Interior renovation on each floor. New storefront windows to replace brick and window on the first floor. New elevator to the roof.
 Extended interior stairs to the roof. New roof deck with vestibule.

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: A-3 and B Type of Construction (per current MI Bldg Code Table 601) IIA

Estimated Cost of Construction \$ 3,000,000 By Contractor \$ _____ By Department

Structure Use

Residential-Number of Units: _____ Office-Gross Floor Area _____ Industrial-Gross Floor Area _____
 Commercial-Gross Floor Area: _____ Institutional-Gross Floor Area _____ Other-Gross Floor Area 10,360

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: _____

Zoning: _____ Date: _____ Notes: _____

Other: _____ Date: _____ Notes: _____



IDENTIFICATION (All Fields Required)

Property Owner/Homeowner Property Owner/Homeowner is Permit Applicant

Name: Isaac Agree Downtown Synagogue Company Name: same

Address: 1457 Griswold City: Detroit State: MI Zip: 48226

Phone: (313) 962-4047 Mobile: _____

Driver's License #: _____ Email: ajfrank@downtownsynagogue.org

Contractor Contractor is Permit Applicant

Representative Name: Jay McKee Company Name: Sachse Construction & Development Company, LLC

Address: 3663 Woodward Ave, Suite 500 City: Detroit State: MI Zip: 48201

Phone: 313-481-8200 Mobile: 313-498-6989 Email: jmckee@sachse.net

City of Detroit License #: 2102115879

TENANT OR BUSINESS OCCUPANT Tenant is Permit Applicant

Name: _____ Phone: _____ Email: _____

ARCHITECT/ENGINEER/CONSULTANT Architect/Engineer/Consultant is Permit Applicant

Name: Joel Smith State Registration#: 31120 Expiration Date: 10/16/2023

Address: 400 Galleria Officentre City: Southfield State: MI Zip: 48034

Phone: 248-352-8310 Mobile: 248-302-4680 Email: jsmith@neumannsmith.com

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: Joel Smith, AIA Signature: _____ Date: 07/14/2021
(Permit Applicant)

Driver's License #: S 530 425 488 159 Expiration: 03-01-2024

Subscribed and sworn to before me this 14TH day of JULY 2021 A.D. OAKLAND County, Michigan

Signature: _____ My Commission Expires: 1-5-2027
(Notary Public)

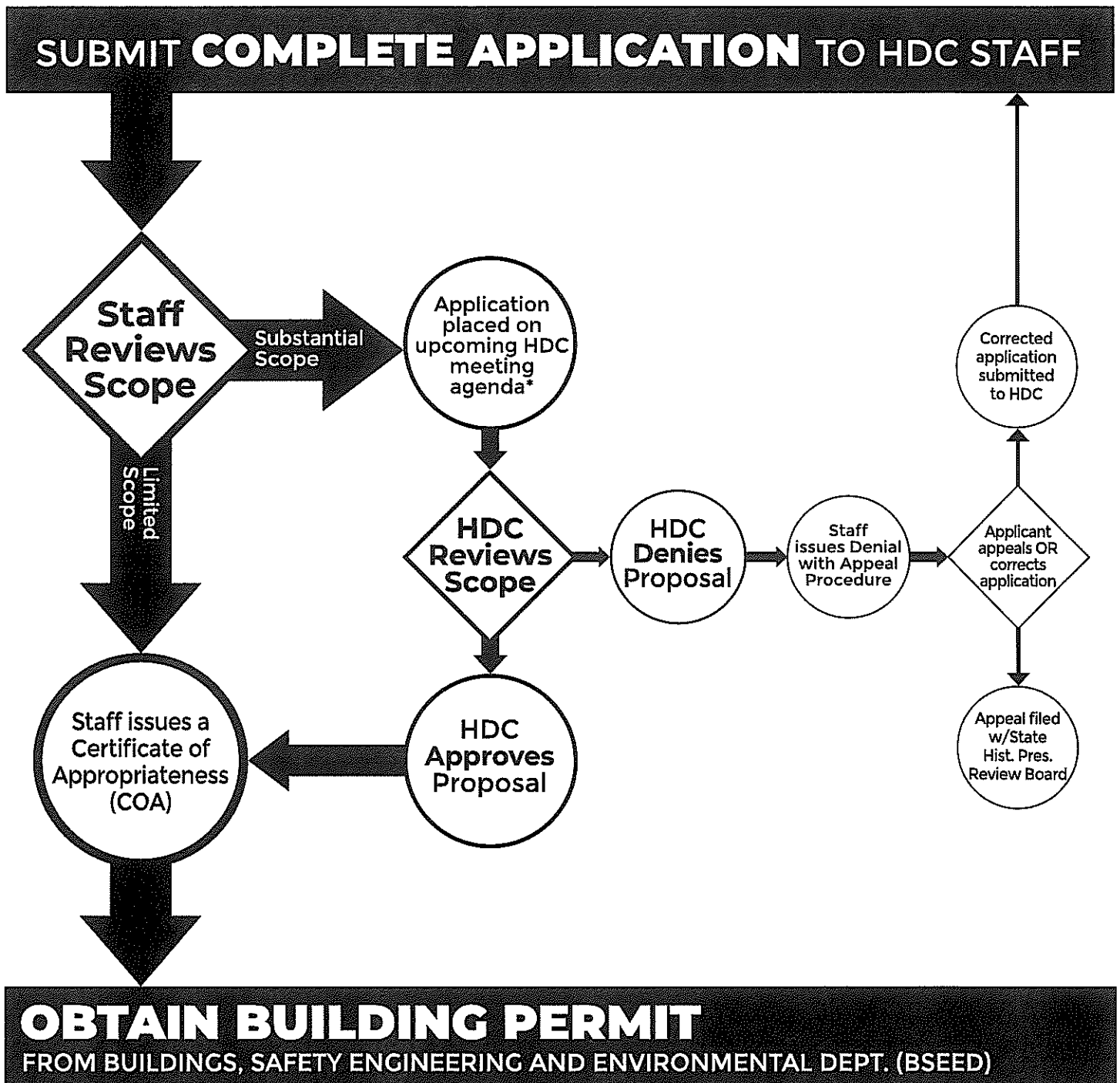
Section 23a of the state construction code act of 1972, 1972PA230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Visitors of Section 23a are subject to civil fines.

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

MELANIE S. JOHNSON
NOTARY PUBLIC, STATE OF MI
COUNTY OF OAKLAND
MY COMMISSION EXPIRES Jan 5, 2027
ACTING IN COUNTY OF OAKLAND



HISTORIC DISTRICT COMMISSION REVIEW & PERMIT PROCESS



* THE **COMMISSION MEETS REGULARY 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