

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: 2-10-22

## PROPERTY INFORMATION

ADDRESS(ES): 391-393 W. GRAND BLVD. AKA: \_\_\_\_\_

PARCEL ID: 1400 8331 HISTORIC DISTRICT: \_\_\_\_\_

SCOPE OF WORK: (Check ALL that apply)

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

BRIEF PROJECT DESCRIPTION: \_\_\_\_\_

## APPLICANT IDENTIFICATION

Property Owner/  
Homeowner

Contractor

Tenant or  
Business Occupant

Architect/Engineer/  
Consultant

NAME: THEOPHORE E. DAPKUS COMPANY NAME: TEP DAPKUS LICENSED BUILDER

ADDRESS: 31225 LAHSEE ROAD CITY: BUBERLY HILLS STATE: MI ZIP: 48025

PHONE: \_\_\_\_\_ MOBILE: 248 245-0552 EMAIL: TDAPKUS@ATT.NET

## 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

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.

### NOTE:

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

See [www.detroitmi.gov/hdc](http://www.detroitmi.gov/hdc) for scope-  
specific requirements.

**SUBMIT COMPLETED REQUESTS TO: [HDC@DETROITMI.GOV](mailto:HDC@DETROITMI.GOV)**



P2 - BUILDING PERMIT APPLICATION

Date: \_\_\_\_\_

PROPERTY INFORMATION

Address: 391-393 W. Grand Blvd. Floor: \_\_\_\_\_ Suite#: \_\_\_\_\_ Stories: 2
AKA: \_\_\_\_\_ Lot(s): 23 Subdivision: B. Hubbard's
Parcel ID#(s): 14008331 Total Acres: \_\_\_\_\_ Lot Width: \_\_\_\_\_ Lot Depth: \_\_\_\_\_
Current Legal Use of Property: Residential Proposed Use: Residential
Are there any existing buildings or structures on this parcel? [X] Yes [ ] No

PROJECT INFORMATION

Permit Type: [ ] New [X] 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)
Window replacement

[ ] 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 [X] Existing Structure [X] Tenant Space [ ] Garage/Accessory Building
[ ] Other: \_\_\_\_\_ Size of Structure to be Demolished (LxWxH) \_\_\_\_\_ cubic ft.

Construction involves changes to the floor plan? [ ] Yes [X] No
(e.g. interior demolition or construction to new walls)

Use Group: \_\_\_\_\_ Type of Construction (per current MI Bldg Code Table 601) \_\_\_\_\_

Estimated Cost of Construction \$ \_\_\_\_\_ \$ \_\_\_\_\_
By Contractor By Department

Structure Use

[X] Residential-Number of Units: 2 [ ] 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: \_\_\_\_\_

Zoning: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: \_\_\_\_\_

Other: \_\_\_\_\_ Date: \_\_\_\_\_ Notes: \_\_\_\_\_





**IDENTIFICATION** (All Fields Required)

**Property Owner/Homeowner**

Property Owner/Homeowner is Permit Applicant

Name: Napoleonas Miskinis Living Trust Company Name: MKD Properties  
Address: P.O. BOX 250458 City: Franklin State: MI Zip: 48025  
Phone: (248) 613-3624 Mobile: (248) 613-3624  
Driver's License #: \_\_\_\_\_ Email: kmiskinis@aol.com

**Contractor**

Contractor is Permit Applicant

Representative Name: Theodore E. Dapkus Company Name: Ted Dapkus Licenced Builder  
Address: 31225 Lahser Road City: Beverly Hills State: MI Zip: 48025  
Phone: (248) 245-0552 Mobile: (248) 245-0552 Email: tdapkus@att.net  
City of Detroit License #: 2101145609

**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: Theodore E. Dapkus Signature: *Ted Dapkus* Date: 2-10-22  
(Permit Applicant)

Driver's License #: D 122 792 189 754 Expiration: 9-30-2023

Subscribed and sworn to before me this 10th day of FEB 20 22 A.D. Oakland County, Michigan

Signature: *[Signature]* My Commission Expires: 3-31-2026  
(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](http://detroitmi.gov/bseed/elaps) for more information.

