



HISTORIC DISTRICT COMMISSION APPLICATION FOR WORK APPROVAL

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

APPLICATION ID

HDC2025-00295

PROPERTY INFORMATION

ADDRESS(ES): 2814 Oakman Blvd

HISTORIC DISTRICT: Oakman Boulevard

SCOPE OF WORK: (Check ALL that apply)

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

BRIEF PROJECT DESCRIPTION:

Tear off and re-roof house and attached garage. Remove and replace gutters, fascia and soffit

APPLICANT IDENTIFICATION

TYPE OF APPLICANT: Contractor

NAME: Greg Tittle

COMPANY NAME: Tittle Brothers Construction

ADDRESS: 19055 Allen Rd

CITY: Brownstown

STATE: MI

ZIP: 48183

PHONE: +1 (734) 225-2525

EMAIL: permits@tittlebrothers.com

I AGREE TO AND AFFIRM THE FOLLOWING:

- ☒ I understand that the failure to upload all required documentation may result in extended review times for my project and/or a denied application.
- ☒ I understand that the review of this application by the Historic District Commission does not waive my responsibility to comply with any other applicable ordinances including obtaining appropriate permits (building, sign, etc.) or other department approvals prior to beginning the work.
- ☒ I hereby certify that the information on this application is true and correct. I certify that the proposed work is authorized by the owner of record and I have been authorized to make this application as the property owner(s) authorized agent.

Signed by:

Greg Tittle

Tittle Brothers Construction

Greg Tittle

05/28/2025

SIGNATURE

DATE

19055 Allen Rd

Brownstown

MI

48183

+1 (734) 225-2525

permits@tittlebrothers.com

Questions? Contact us at hdc@detroitmi.gov or (313)224-1762


NOTE: Based on the scope of work, additional documentation may be required. See www.detroitmi.gov/hdc for scope-specific requirements.

PROJECT DETAILS – TELL US ABOUT YOUR PROJECT

Instructions: Add project details using the text box in each section. If your details exceed the space provided, attach the details via the attachment icon for that section.

ePLANS PERMIT NUMBER: (only applicable if you've already applied for permits through ePLANS)	RES2025-01925
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GENERAL

<p>1. DESCRIPTION OF EXISTING CONDITION <i>Please tell us about the current appearance and conditions of the areas you want to change. You may use a few sentences or attach a separate prepared document on the right. (For example, "existing roof on my garage is covered in gray asphalt shingles in poor condition.")</i></p> <p>Current asphalt shingles are in poor condition. Fascia boards are rotted and gutters are damaged</p>	
<p>2. PHOTOGRAPHS <i>Help us understand your project. Please attach photographs of all areas where work is proposed.</i></p>	
<p>3. DESCRIPTION OF PROJECT <i>In this box, tell us about what you want to do at the areas described above in box #1. (For example, Install new asphalt shingle roofing at garage.)</i></p>	
<p>4. DETAILED SCOPE OF WORK <i>In this box, please describe all steps necessary to complete the work described in box #3. (For example, "remove existing shingles, replace wood deck as necessary, replace wood eaves, install roof vents, replace rotted fascia boards, paint, clean worksite.")</i></p> <p>Tear off and re-roof house and attached garage, replace OSB as needed. Remove and replace fascia boards and gutters.</p>	
<p>5. BROCHURES/CUT SHEETS <i>Please provide information on the products or materials you are proposing to install. For example, a brochure on the brand and color of the shingles proposed.</i></p>	

ADDITIONAL DETAILS









