



HISTORIC DISTRICT COMMISSION APPLICATION FOR WORK APPROVAL

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

APPLICATION ID

HDC2025-00300

PROPERTY INFORMATION

ADDRESS(ES): 1725 seyburn

HISTORIC DISTRICT: West Village

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"/> 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:

Changing windows

APPLICANT IDENTIFICATION

TYPE OF APPLICANT: Property Owner/Homeowner

NAME: Tracy Lowe

COMPANY NAME: Na

ADDRESS: 6135 Harvard

CITY: Detroit

STATE: MI

ZIP: 48224

PHONE: +1 (313) 414-6648

EMAIL: Tracylowetl@gmail.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 I am the legal owner and occupant of the subject property and that the information on this application is true and correct.

DocuSigned by:

Tracy Lowe

Na

Tracy Lowe

05/29/2025

SIGNATURE

DATE

6135 Harvard

Detroit

MI

48224

+1 (313) 414-6648

Tracylowetl@gmail.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) | N/A |
|---|-----|

GENERAL

| | |
|---|---|
| 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> | |
| Broken an missing windows | |
|  | |
| 2. PHOTOGRAPHS <i>Help us understand your project. Please attach photographs of all areas where work is proposed.</i> |  |
| 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> | |
| Install new windows | |
| 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> | |
| | |
| 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> | |

ADDITIONAL DETAILS

| | |
|---|--|
| <div><div>6. WINDOWS/DOORS</div><div>Detailed photographs of window(s) and/or door(s) proposed for replacement showing the condition of the interior and exterior of the window(s) and/or door(s)</div></div> | <div></div> |
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