

HISTORIC DISTRICT COMMISSION APPLICATION FOR WORK APPROVAL

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

APPLICATION ID

HDC2025-00417

PROPERTY INFORMATION				
ADDRESS(ES): 3116 Park Ave				
HISTORIC DISTRICT: Peterboro-Charlotte				
SCOPE OF WORK: (Check ALL that apply)				
Windows/ Walls/ Painting Doors	Roof/Gutters/ Chimney	Porch/Deck/Balcony Other		
☐ Demolition ☐ Signage ☐ New Building ☐	Addition S	Site Improvements andscape, trees, fences, atios, etc.)		
BRIEF PROJECT DESCRIPTION:				
Rehabilitate historic parking lot at 3116 Park Ave. Restore surfa	ice, improve usability.			
ADDI ICANIT IDENTIFICATION				
APPLICANT IDENTIFICATION				
TYPE OF APPLICANT: Architect/Engineer/Consultant				
NAME: Landy Cass LLC	COMPANY NAME: Landy Cass LLC			
ADDRESS: 42 Watson St	CITY: Detroit	STATE : MI ZIP : 48201		
PHONE: +1 (313) 831-9484	EMAIL: chris.franz@peak-management.com			
I AGREE TO AND AFFIRM THE FOLLOW	NG:			
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:	Landy Cass LLC			
landy Cass UC	06/17/2025			
3/25FA706E269478 SIGNATURE	DATE			
42 Watson St	D	etroit MI 48201		
+1 (313) 831-9484	chris.franz@peak-management.com			

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:	N/A	
(only applicable if you've already applied for permits through ePLANS)	IN/A	

GENERAL

1. DESCRIPTION OF EXISTING CONDITION

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.")

Historic records indicate that this parcel was previously used as a parking lot - the site is now overgrown, unpaved, and functionally unusable due to surface deterioration and lack of maintenance.



2. PHOTOGRAPHS

Help us understand your project. Please attach photographs of all areas where work is proposed.



3. DESCRIPTION OF PROJECT

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.)

4. DETAILED SCOPE OF WORK

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.")

5. BROCHURES/CUT SHEETS

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.

ADDITIONAL DETAILS	
8. SITE IMPROVEMENTS If site improvements are proposed, please provide any relevant site improvement plans pertaining to your project.	









