

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

CITY OF DETROIT
PLANNING & DEVELOPMENT DEPARTMENT
2 WOODWARD AVENUE, ROOM 808, DETROIT, MI 48226

DATE: June 8, 2020

PROPERTY INFORMATION

ADDRESS: 2484 West Boston Blvd AKA: _____

HISTORIC DISTRICT: Boston

SCOPE OF WORK: (Check ALL that apply)

<input type="checkbox"/> Windows/ Doors	<input type="checkbox"/> Roof/Gutters/ Chimney	<input type="checkbox"/> Porch/ Deck	<input type="checkbox"/> Landscape/Fence/ Tree/Park	<input type="checkbox"/> General Rehab
<input type="checkbox"/> New Construction	<input type="checkbox"/> Demolition	<input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Other: <u>New Garage</u>	

APPLICANT IDENTIFICATION

Property Owner/
Homeowner Contractor Tenant or
Business Occupant Architect/Engineer/
Consultant

NAME: Thomas Goodley COMPANY NAME: _____

ADDRESS: 2484 West Boston Blvd CITY: Detroit STATE: MI ZIP: 48206

PHONE: 3139157102 MOBILE: 3138157102 EMAIL: thomas.goodley@gmail.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)
- Photographs** of ALL sides of existing building or site
- Detailed photographs** of location of proposed work (photographs to show existing condition(s), design, color, & material)
- 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 (BSEED) to perform the work.

SUBMIT COMPLETED REQUESTS TO HDC@DETROITMI.GOV

IDENTIFICATION (All Fields Required)

Property Owner/Homeowner

Property Owner/Homeowner is Permit Applicant

Name: Thomas Goodley Company Name: _____

Address: 2484 West Boston Blvd City: Detroit State: MI Zip: 48206

Phone: 3139157102 Mobile: _____

Driver's License #: g340792015544 Email: thomas.goodley@gmail.com

Contractor

Contractor is Permit Applicant

Representative Name: _____ Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Email: _____

City of Detroit License #: _____

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: Thomas Goodley Signature: [Signature] Date: 6/16/2020
(Homeowner)

Subscribed and sworn to before me this 16th day of JUNE 2020 A.D. Wayne County, Michigan

Signature: [Signature] My Commission Expires: 07/09/2026
(Notary Public)

MALEK HARAJI
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF WAYNE
My Comm. Exp. 07/09/26
Acting in the County of Wayne
Date: 6/16/2020

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

P2 - BUILDING PERMIT APPLICATION

Date: June 8, 2020

PROPERTY INFORMATION

Address: 2484 West Boston Blvd Floor: _____ Suite#: _____ Stories: _____
AKA: _____ Lot(s): _____ Subdivision: Joy Farm
Parcel ID#(s): 10002812 Total Acres: _____ Lot Width: 50 Lot Depth: 174.15
Current Legal Use of Property: Residence Proposed Use: Residencial
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: New Garage
 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)

I'm looking to build a new garage. The previous garage was demoed prior to me purchasing the home. It currently has a concrete slab where the original

garage once stood. I will be using original slab and adding concrete around existing concrete slab to meet measurements for garage so that I can park a truck inside.

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: _____ Type of Construction (per current MI Bldg Code Table 601) Type III

Estimated Cost of Construction \$ 12,000 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 _____

Proposed No. of Employees: _____ List materials to be stored in the building: _____

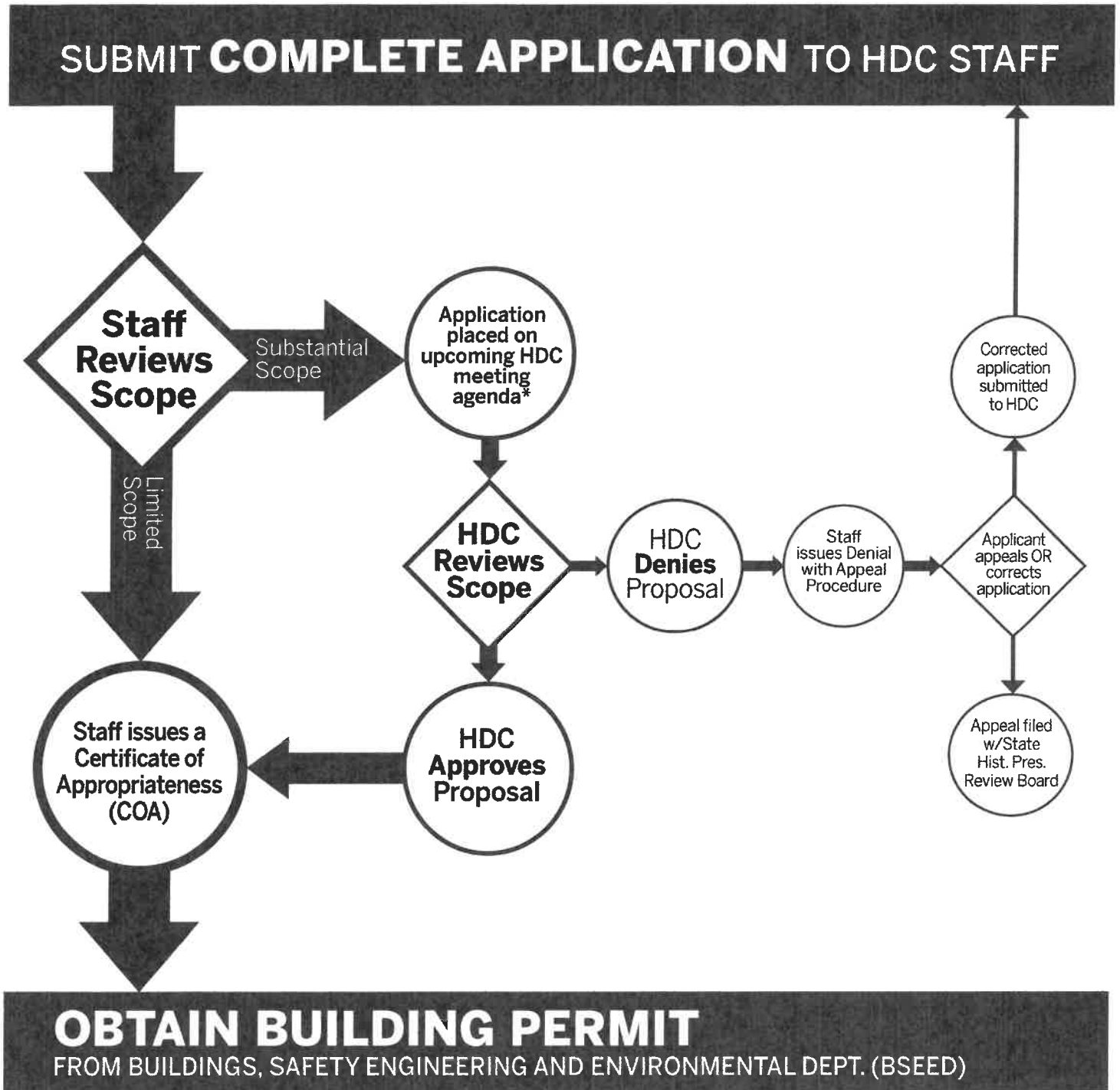
PLOT PLAN SHALL BE submitted on separate sheets and shall show all easements and measurements (must be correct and in detail). SHOW ALL streets abutting lot, indicate front of lot, show all buildings, existing and proposed distances to lot lines. (Building Permit Application Continues on Next Page)

For Building Department Use Only

Intake By: _____ Date: _____ Fees Due: _____ DngBld? No

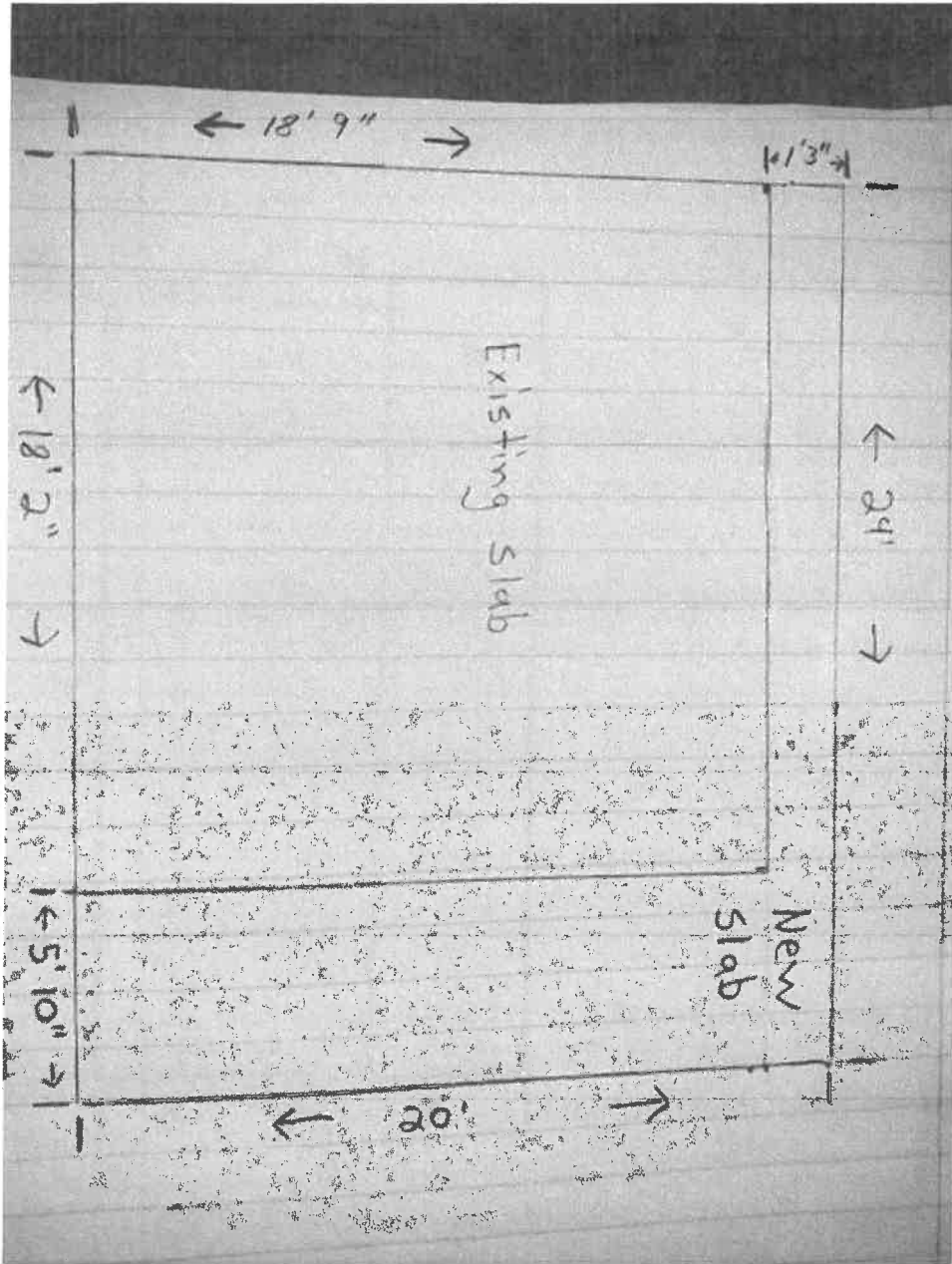
Permit Description:

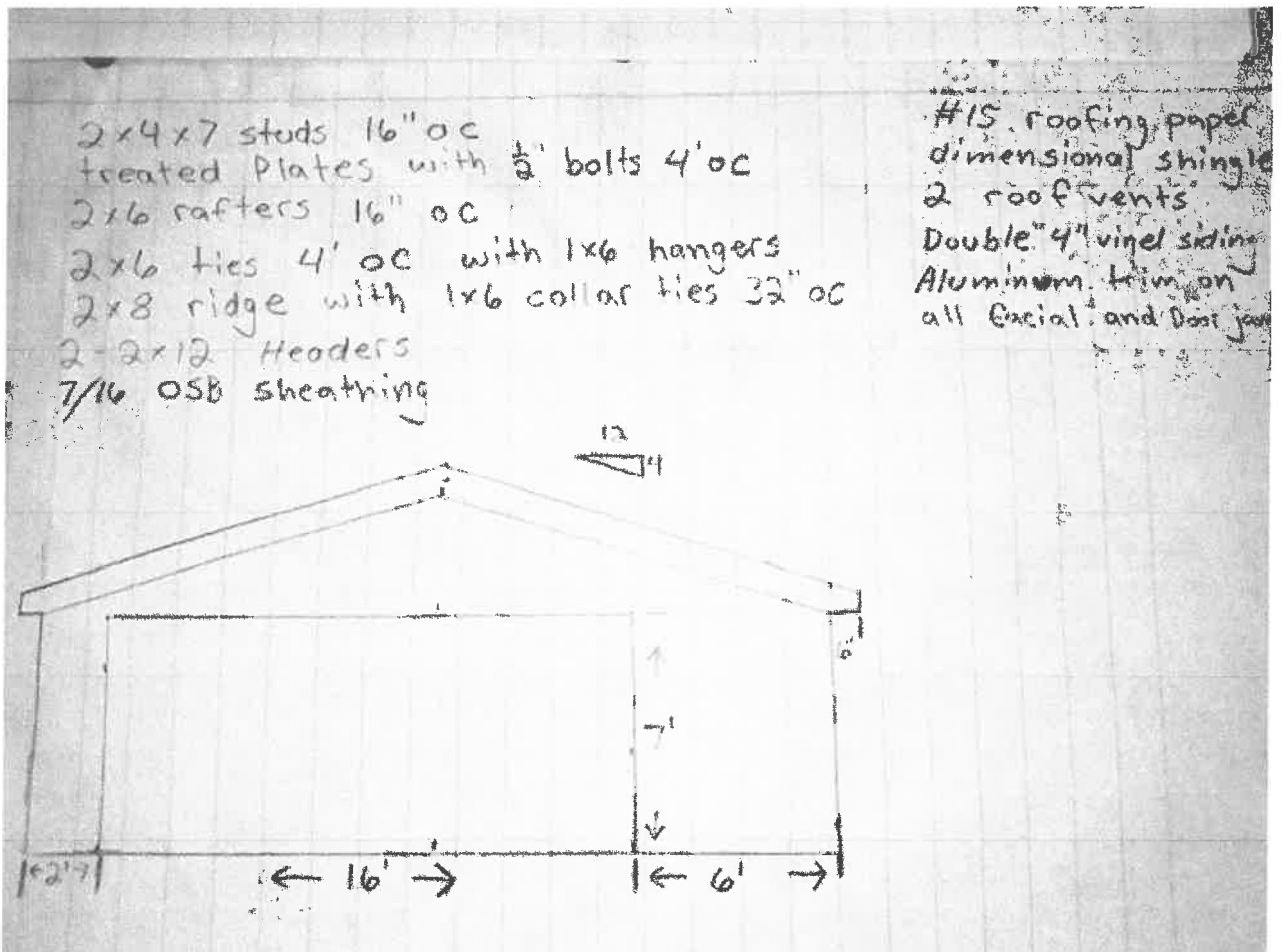
HISTORIC DISTRICT COMMISSION REVIEW & PERMIT PROCESS

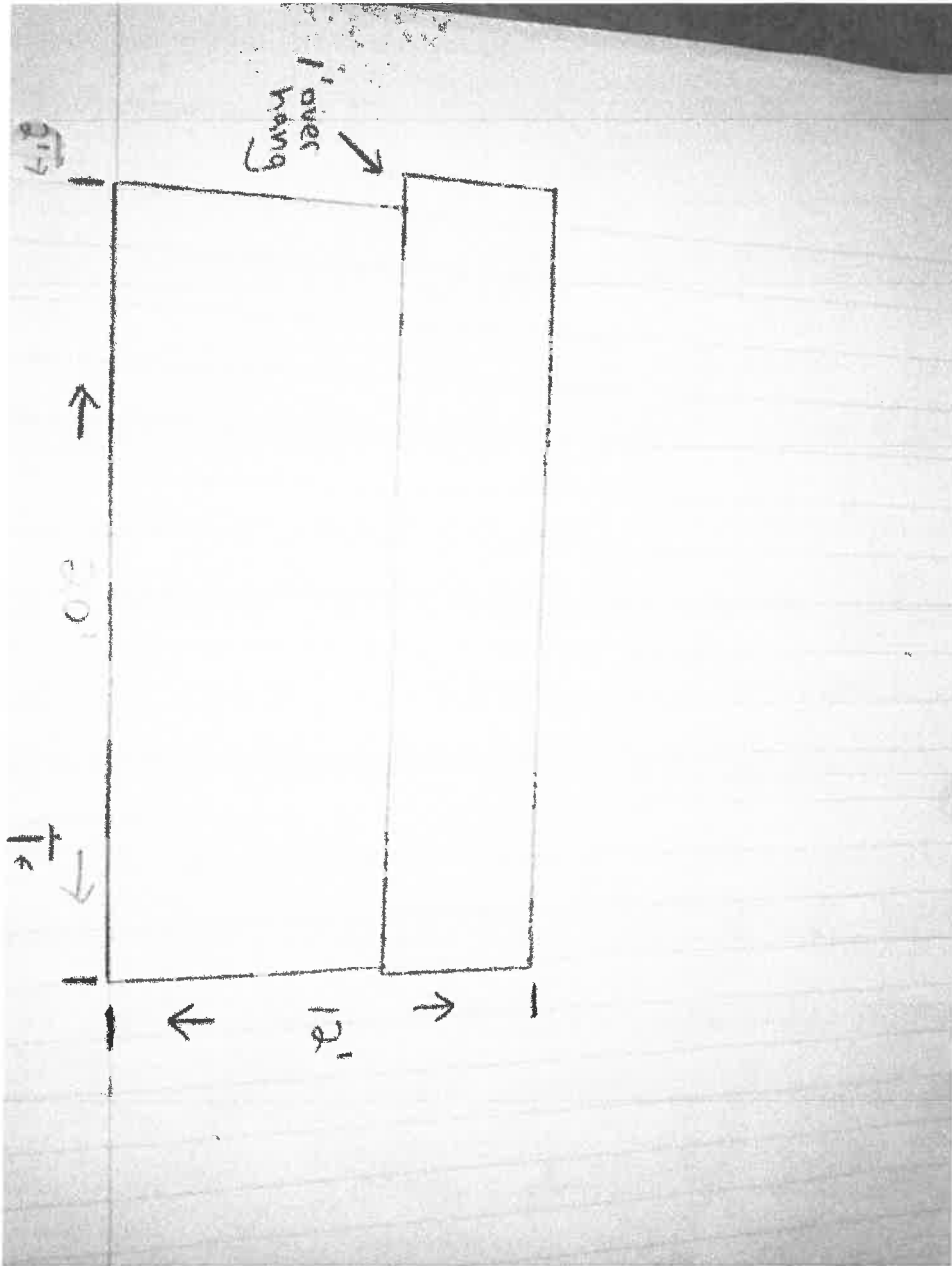


* THE **COMMISSION MEETS REGULARY AT LEAST ONCE PER MONTH**, TYPICALLY ON THE SECOND WEDNESDAY OF THE MONTH.
(SEE WEBSITE FOR MEETING SCHEDULE/AGENDAS)

FIND OUT MORE AT www.detroitmi.gov/hdc















Description of existing conditions

Currently there is no garage just a slab.

Description of project

Looking to add a garage to my property as garage was removed prior to purchase of home. I will be adding additional concrete to support the scope of work.

Scope of Work

- Expand garage slab from 18'2" x 18'9" to 21' x 20'
- Frame and sheet new garage
- Install 25 year shingles
- Install vinyl siding and trim
- Install 7' x 16' garage door