THIS IS A 3-PAGE FORM - ALL INFORMATION IS REQUIRED FOR PROJECT REVIEW

# HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

Date: 1/25/2021

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

PROPERTY INFORMATION				
ADDRESS: 4133 Woodward Ave. + 67 W. Willis	<b>AKA:</b> Parcels 02001798 + 02000855			
HISTORIC DISTRICT: Willis-Selden Local Historic District				
SCOPE OF WORK: Windows/Doors Roof/Gutters/Chimney  New Construction Demolition	Porch/ Landscape/Fence/ General Rehab  Addition  Other: Rooftop HVAC			
APPLICANT IDENTIFICATION				
Homeowner Contractor	Fenant or Business Occupant Consultant  NAME: Quinn Evans			
ADDRESS: 4219 Woodward Ave. CITY: Detro				
PHONE: MOBILE: 313.590.7216	EMAIL: danderson@quinnevans.com			
PROJECT REVIEW REQUEST CHECKLIST				
Please attach the following documentation to your request:				
*PLEASE KEEP FILE SIZE OF ENTIRE SUBMISSION UNDER 30MB*  X Completed Building Permit Application (highlighted portions only)  Based on the scope of work,				
ePLANS Permit Number (only applicable if you've already applied for permits through ePLANS)				
Photographs of ALL sides of existing building or site	See www.detroitmi.gov/hdc for scope-specific requirements.			
Detailed photographs of location of proposed work (photographs to show existing condition(s), design, color, & material)				
<b>✓ Description of existing conditions</b> (including materials and design)				
Description of project (if replacing any existing material(s), include an explanation as to why replacementrather than repairof existing and/or construction of new is required)				
<b>✓ Detailed scope of work</b> (formatted as bulleted list)				
<b>✔</b> 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 (BSEED) to perform the work.

SUBMIT COMPLETED REQUESTS TO HDC@DETROITMI.GOV

### **P2 - BUILDING PERMIT APPLICATION**

			Date: 1/25/2021
PROPERTY INFORMATION	ON		
Address: 4133 Woodward Ave.		Floor: Sui	te#:Stories: 02
AKA:	Lot	- :(s): 07/08/09/33 Subc	livision: Park Lots
AKA:	0855 Total Acres: 0.9	6 Lot Width: <b>v</b> a	aries Lot Depth: varie
Current Legal Use of Property:			
Are there any existing building	-		☐ No
PROJECT INFORMATION	V		
Permit Type: New	■ Alteration	on Demolition	Correct Violation
Foundation Only Cha			
Revision to Original Permit			
Description of Work (Describe			
See attached Rehabilitation Scope of		oo o, p.opoloj, attaon ii	-
		MBC use change	No MBC use chan
Included Improvements (Ch	eck all applicable; these trade a	reas require separate pe	ermit applications)
HVAC/Mechanical	Electrical Plumbing	Fire Sprinkler	System 🔳 Fire Ala
Structure Type	_		
New Building Existin	ng Structure 🔳 Tenant S	Space Garage	e/Accessory Building
Other: Siz	_		
Construction involves changes	-		
(e.g. interior demolition or constructi	' '		
Use Group: M Ty		rent MI Bldg Code Table	e 601) <b>VB</b>
	·		
<b>Estimated Cost of Construct</b> Structure Use	By Contractor		By Department
Residential-Number of Units:	Office-Gross Floor Ar	ea Indus	trial-Gross Floor Area
Commercial-Gross Floor Area: 1			ner-Gross Floor Area
Proposed No. of Employees:			
PLOT PLAN SHALL BE submitte			nts and measurements
(must be correct and in detail).	SHOW ALL streets abutting	lot, indicate front of	lot, show all building
existing and proposed distance			es on Next Page)
	For Building Departme		🖂
Intake By:	Date:	Fees Due:	DngBld?
Permit Description:			
L Current Legal Land Use:		 Proposed Use:	
Permit#:			
Zoning District:			
Lots Combined? Yes			
			, \$
Revised Cost (revised permit app			
Structural:			
Zoning:			
Other:	Date:	Notes:	

<b>IDENTIFICATION</b> (All Fields Required)		
	•	ner is Permit Applicant
Name: Mario Kiezi	Company Name:	KP Detroit Holdings, LLC
Address: 4161 Woodward Ave.	City: Detroit	State: Mi Zip: 48201
Phone: 248.718.4209	Mobile: <u>586.850.5</u>	5678
Driver's License #: K200585009421	Email: mario@mki	ezi.com
<b>Contractor</b> Contractor is Permit Ap	plicant	
Representative Name: N/A	Company Name	e: N/A
Address:		
Phone: Mobile:	Email:	
City of Detroit License #:		
		A 1: .
TENANT OR BUSINESS OCCUPANT	<del></del>	
Name: Phone:	Email:	
ARCHITECT/ENGINEER/CONSULTAN	<b>JT</b>	eer/Consultant is Permit Applicant
Name: Devan Anderson State R		
Address: 4219 Woodward Ave., Suite 301	City: Detroit	State: Mi Zip: 48201
Phone: Mobile: 313.59	0.7216 Email:	danderson@quinnevans.com
HOMEOWNER AFFIDAVIT (Only re		
I hereby certify that I am the legal owner and con this permit application shall be completed a requirements of the City of Detroit and take ful inspections related to the installation/work here other person, firm or corporation any portion of	by me. I am familiar with Il responsibility for all co ein described. I shall ne	n the applicable codes and ode compliance, fees and ither hire nor sub-contract to any
Print Name: Sig	gnature:	Date:
Subscribed and sworn to before me thisd		
Signature: (Notary Public)		
PERMIT API	PLICANT SIGNATURE	
I hereby certify that the information on this apprestrictions that may apply to this construction certify that the proposed work is authorized by to make this application as the property owner all applicable laws and ordinances of jurisdictions inspections are requested and conducted with the previous inspection and that expired per section in the previous inspection and that expired per sections.	n and am aware of my re y the owner of the reco er(s) authorized agent. F on. I am aware that a prithin 180 days of the o	esponsibility thereunder. I ord and I have been authorized further I agree to conform to permit will expire when no
Print Name: Sig	gnature:	Date:
Driver's License #:	Expiration:	5
Subscribed and sworn to before me thisd	ay ot20A	.D County, Michigan
Signature:(Notary Public)	iVly Commission Exp	pires:
G 11 00 C11		

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.

 $This application \ can \ also \ be \ completed \ online. \ Visit \ detroitmi.gov/bseed/elaps \ for \ more \ information.$ 



## HISTORIC DISTRICT COMMISSION REVIEW & PERMIT PROCESS

#### SUBMIT **COMPLETE APPLICATION** TO HDC STAFF **Application Staff** placed on Substantial Corrected **Reviews** upcoming HDC application Scope meeting Scope submitted agenda<sup>3</sup> to HDC **HDC HDC** Staff **Applicant** issues Denial appeals OR Reviews **Denies** with Appeal corrects Scope Proposal Procedure application Appeal filed Staff issues a **HDC** w/State Certificate of **Approves** Hist. Pres. **Appropriateness** Review Board **Proposal** (COA)

### OBTAIN BUILDING PERMIT

FROM BUILDINGS, SAFETY ENGINEERING AND ENVIRONMENTAL DEPT. (BSEED)

\* 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