

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

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

DATE: _____

PROPERTY INFORMATION

ADDRESS: 15327 WARWICK AKA: _____

HISTORIC DISTRICT: _____

SCOPE OF WORK: Windows/Doors Roof/Gutters/Chimney Porch/Deck Landscape/Fence/Tree/Park General Rehab
(Check ALL that apply) New Construction Demolition Addition Other: _____

APPLICANT IDENTIFICATION

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

NAME: Alunda Boykin COMPANY NAME: _____

ADDRESS: 15327 WARWICK CITY: DETROIT STATE: MI ZIP: 48223

PHONE: _____ MOBILE: 313/715/7104 EMAIL: Alundaboykin@hotmail.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