

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

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

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

Date: 1-6-2021

PROPERTY INFORMATION

ADDRESS: 4245 FULLERTON ST

AKA:

HISTORIC DISTRICT:

SCOPE OF WORK: (Check ALL that apply)

<input type="checkbox"/> Windows/ Doors	<input checked="" 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 type="checkbox"/> Other: _____	

APPLICANT IDENTIFICATION

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

NAME: RICH HOTEA COMPANY NAME: PERFORMANCE REMODELING

ADDRESS: 14017 23 MILE RD CITY: SHELBY TOWN STATE: MI ZIP: 48315

PHONE: 586.991.8802 MOBILE: EMAIL: JOE@PR2.GLOBAL

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**

P2 - BUILDING PERMIT APPLICATION

Date: 1-6-2021

PROPERTY INFORMATION

Address: 4245 FULLERTON ST Floor: _____ Suite#: _____ Stories: _____
AKA: _____ Lot(s): _____ Subdivision: _____
Parcel ID#(s): 14004818 Total Acres: _____ Lot Width: _____ Lot Depth: _____
Current Legal Use of Property: RESIDENTIAL Proposed Use: _____
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: _____
 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)

TEAR OF AND RE-ROOF, REMOVE (3) LAYERS, INSTALL NEW LANDMARK PRO HD SHINGLES (3) LAYERS.

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) _____

Estimated Cost of Construction \$ 9600 By Contractor \$ _____ By Department

Structure Use

Residential-Number of Units: 1 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: _____

Permit #:

Current Legal Land Use: _____ Proposed Use: _____

Permit#: _____ Date Permit Issued: _____ Permit Cost: \$ _____

Zoning District: _____ Zoning Grant(s): _____

Lots Combined? Yes No (attach zoning clearance)

Revised Cost (revised permit applications only) Old \$ _____ New \$ _____

Structural: _____ Date: _____ Notes: _____

Zoning: _____ Date: _____ Notes: _____

Other: _____ Date: _____ Notes: _____



IDENTIFICATION (All Fields Required)

Property Owner/Homeowner Property Owner/Homeowner is Permit Applicant

Name: JACQUELINE DUNCAN Company Name: _____
Address: 4245 FULLERTON ST City: DETROIT State: MI Zip: 48238
Phone: 586.991.8802 Mobile: 586.991.8872
Driver's License #: _____ Email: JOE@PR2.GLOBAL

Contractor Contractor is Permit Applicant

Representative Name: RICHARD HOTEA Company Name: PERFORMANCE RESIDENTIAL REMODELING
Address: 14017 23 MILE RD City: SHELBY TOWNSHIP State: MI Zip: 48313
Phone: 586.991.8802 Mobile: 586.991.8872 Email: JOE@PR2.GLOBAL
City of Detroit License #: LIC2018-00283

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: _____ Signature: _____ Date: _____
(Homeowner)

Subscribed and sworn to before me this _____ day of _____ 20 ____ A.D. _____ County, Michigan

Signature: _____ My Commission Expires: _____
(Notary Public)

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**

Print Name: RICHARD HOTEA Signature: _____ Date: 1-6-2021
(Permit Applicant)

Driver's License #: H300738585138 Expiration: 2-22-2023

Subscribed and sworn to before me this 6th day of JAN 20 21 A.D. MACOMB County, Michigan

Signature: _____ My Commission Expires: 3-26-2024
(Notary Public)

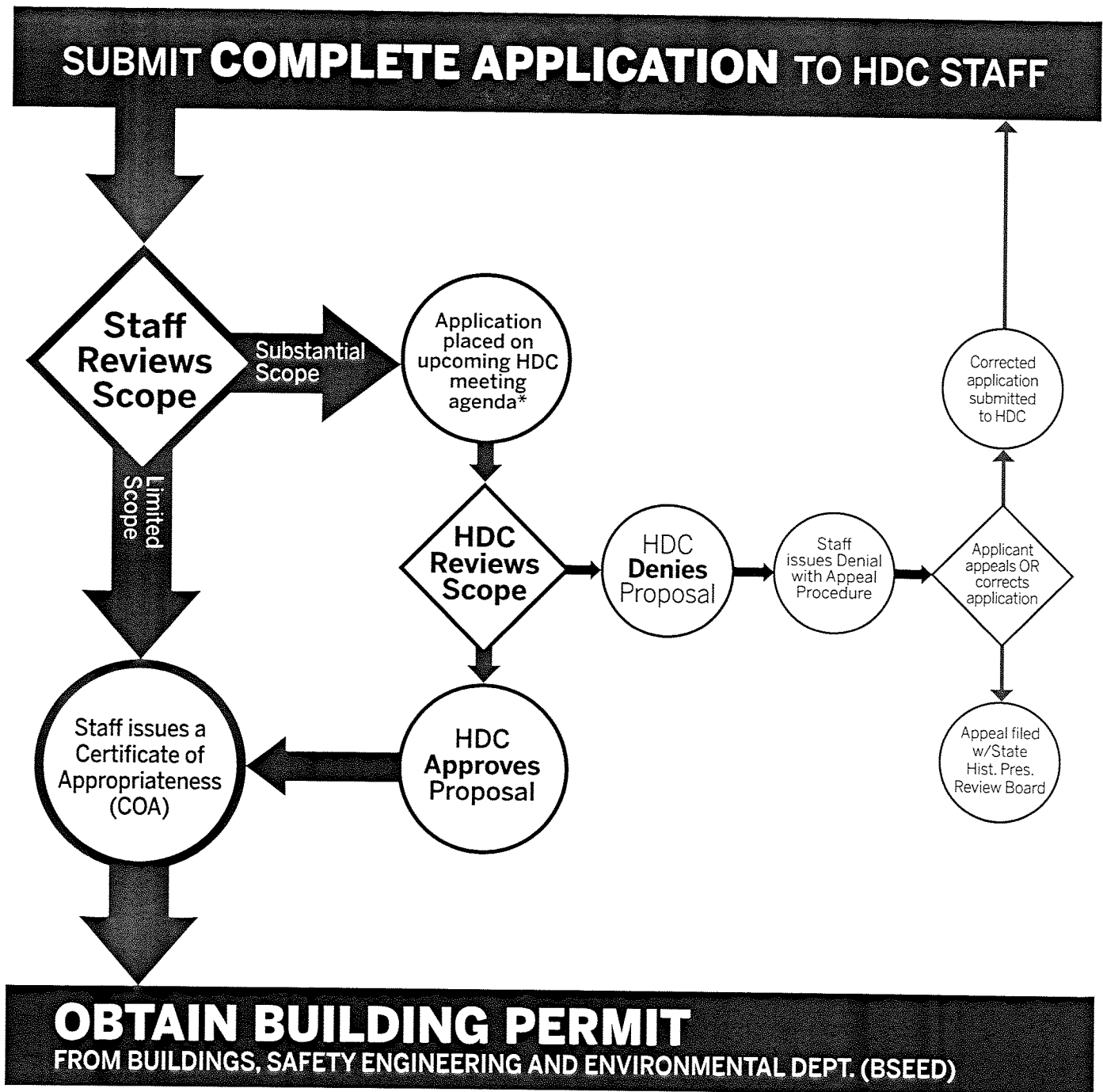
FRANCA ANN VANASSCHE
Notary Public, State of Michigan
County of Macomb
My Commission Expires 03-26-2021

Section 23a of the state construction code act of 1972, 1972PA230, MCL 213.1525A, 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



* THE COMMISSION MEETS REGULARLY 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