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

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

Date: 3/9/21

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

PROPERTY INFORMATION	
ADDRESS: 2233 Park Ave	AKA: lodent Building
HISTORIC DISTRICT: Park Ave Local Section 21-2-203	
SCOPE OF WORK: Windows/Doors Roof/Gutters/Chimney New Construction Demolition	Porch/ Landscape/Fence/ General Rehab Addition Other: Sign
APPLICANT IDENTIFICATION	
Homeowner Contractor Bus	nant or Architect/Engineer/ siness Occupant Consultant NAME: 2233 Park Ave LLC
ADDRESS: 2233 Park Ave CITY: Detroit	STATE: ^{MI} ZIP: ⁴⁸²⁰¹
PHONE: 313-333-4747 MOBILE: 313-333-4747	EMAIL: seanph963@aol.com
PROJECT REVIEW REQUEST CHECKLIST	
Please attach the following documentation to your request: *PLEASE KEEP FILE SIZE OF ENTIRE SUBMISSION UNDER 3 Completed Building Permit Application (highlighted) ePLANS Permit Number (only applicable if you've alr for permits through ePLANS) Photographs of ALL sides of existing building or site	portions only) Based on the scope of work, additional documentation may
Detailed photographs of location of proposed work (photographs to show existing condition(s), design, colo Description of existing conditions (including material)	•
Description of project (if replacing any existing mate replacementrather than repairof existing and/or co	rial(s), include an explanation as to why
Detailed scope of work (formatted as bulleted list)	
Brochure/cut sheets for proposed replacement mate	

SUBMIT COMPLETED REQUESTS TO HDC@DETROITMI.GOV

Buildings, Safety Engineering and Environmental Department (BSEED) to perform the work.

P2 - BUILDING PERMIT APPLICATION

			Date: 3/9/21
PROPERTY INFORMATION	J		
Address: 2233 Park Ave		Floor: Su	uite#:Stories:
AKA: lodent Building	Lot	<u> </u>	division:
Parcel ID#(s): 02000453.			
Current Legal Use of Property: m			-
Are there any existing buildings			☐ No
PROJECT INFORMATION			
Permit Type: New	Alteration Addition	on Demolitio	n Correct Violations
Foundation Only Change	ge of Use Tempora	ary Use Othe	_{r:} Sign
Revision to Original Permit #:			
Description of Work (Describe in			
there is an existing business sign in place, v			
		MBC use change	No MBC use change
Included Improvements (Check	k all applicable; these trade a	reas require separate p	permit applications)
HVAC/Mechanical Ele	ctrical Plumbing	Fire Sprinkler	System Fire Alarm
Structure Type			
New Building Existing	Structure Tenant S	Space Garag	ge/Accessory Building
Other: Size	of Structure to be Demo	lished (LxWxH)	cubic ft.
Construction involves changes to	the floor plan?	Yes	No
(e.g. interior demolition or construction	to new walls)		
Use Group: Typ		rent MI Bldg Code Tab	ole 601)
Estimated Cost of Construction	\$ \$9,000 By Contractor	\$	By Department
Structure Use	By Contractor		By Department
Residential-Number of Units:	Office-Gross Floor Are	ea Indu	strial-Gross Floor Area
Commercial-Gross Floor Area:	Institutional-Gross Flo	or Area	ther-Gross Floor Area
Proposed No. of Employees:	List materials to be stored i	n the building:	
PLOT PLAN SHALL BE submitted	•		
(must be correct and in detail). SH existing and proposed distances t	•		•
	For Building Departme	nt Use Only	
Intake By:	Date:	Fees Due:	DngBld? ☐ No
Permit Description:			
Current Legal Land Use:		Proposed Use:	
Permit#:			
Zoning District:			
Lots Combined? Yes	No (attach zoni		
Revised Cost (revised permit applic	ations only) Old \$	Ne	w \$
Structural:		<u>-</u>	
Zoning:			
Other:			

IDENTIFICATION (All Fields Required)
Property Owner/Homeowner is Permit Applicant
Name: Sean Harrington Company Name: 2233 Park Ave LLC
Address: 2233 Park Ave City: Detroit State: MI Zip: 48201
Phone: 313-333-4747 Mobile: 313-333-4747
Driver's License #: H 652 762 676 863 Email: seanph963@aol.com
Contractor is Permit Applicant
Representative Name: David Paschke Company Name: Metro Signs/Media Swing
Address: 43 DePetrie Way City: GPF State: MI Zip: 48236
Phone: 313-378-7080 Mobile: Email: david@mediaswing.com
City of Detroit License #: LIC 2001-09281
TENANT OR BUSINESS OCCUPANT Tenant is Permit Applicant
Name: same as above Phone: Email:
ARCHITECT/ENGINEER/CONSULTANT Architect/Engineer/Consultant is Permit Applicant
Name: Joe Stelzer State Registration#: Expiration Date:
Address: 11444 Kaltz City: Warren State: MI Zip: 48089
Phone: 586-759-2700 Mobile: 248-219-9127 Email: joe@metrosal.co
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.
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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: (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: David Paschke (Permit Applicant) Driver's License #: P 200 135 234 691 Expiration: 9/5/23
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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 agenda³ 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