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

HISTORIC DISTRICT COMMISSION PROJECT REVIEW REQUEST

DATE:

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

PROPERTY INFORMATION

ADDRESS(ES):		AKA		
PARCEL ID: HISTORIC DISTRICT:				
SCOPE OF WORK: (Check ALL that apply)	Windows/ Walls/ Doors Siding	Painting Chin	r Alteration Site Improv	Addition
BRIEF PROJECT D	ESCRIPTION:			
APPLICANT I	DENTIFICATION	Tenant	or	Architect/Engineer/
Homeowner			s Occupant	Consultant
	(_ ZIP:
PHONE:	MOBILE:		EMAIL:	
PROJECT RE	VIEW REQUEST CH	ECKLIST		
Please attach the following documentation to your request: *PLEASE KEEP FILE SIZE OF <u>ENTIRE</u> SUBMISSION UNDER 30MB*			NOTE: Based on the scope of work, additional	
(highlighted portions only)			documentation may be required.	
ePLANS Permit Number (only applicable if you've already applied for permits through ePLANS)			I See www.detroitmi.gov/hdc for scope- I specific requirements.	

Current Photographs: Including the front of the building & detailed photographs of the area(s) affected by the proposed work. All photographs must be labeled or captioned, e.g. "west wall", "second floor window," etc.

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

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 (BSEtED) to perform the work.

SUBMIT COMPLETED REQUESTS TO: HDC@DETROITMI.GOV