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

HISTORIC DISTRICT COMMISSION ROJECT REVIEW REQUEST

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

2 Woodward Avenue, Suite 808 Detroit, Michigan 48226		DATE: 03.29.2	2
PROPERTY INFORMATION			
ADDRESS(ES): 241 Madison St.	AKA: D	AC	
PARCEL ID: 01000275	_ HISTORIC DISTRICT:_M	adison-Harmonie Sect	. 21-2-151
SCOPE OF WORK: Windows/ Siding (Check ALL that apply) Demolition Signag	Painting Roof/Gu Chimnes Roof/Gu Chimnes Roof/Gu Chimnes Roof/Gu Chimnes Roof/Gu Chimnes	y Balcony teration Site Improvemen	Addition nts ences, patios, etc.)
Abbey Bowling Center renovation and u			
APPLICANT IDENTIFICATION			
Property Owner/ Homeowner NAME: James Capo	Business C	Occupant Are Co ME: Capo Design Group	chitect/Engineer/ nsultant O
ADDRESS:	CITY:	STATE: MI ZI	P:
PHONE: 248.9047263 MOBILE:_		ЕМАІІ: jcapo@capod	lesigngroup.c
PROJECT REVIEW REQUEST C	HECKLIST		
Please attach the following documentation *PLEASE KEEP FILE SIZE OF ENTIRE SUBMISS	5 5	NOTE:	
Completed Building Permit Applicate (highlighted portions only)	tion	Based on the scope of a documentation may be	
ePLANS Permit Number (only application applied for permits through ePLANS)	able if you've already	See www.detroitmi.gov specific requirements.	/hdc for scope-
Current Photographs: Including the fr the proposed work. All photographs mu			
Description of existing conditions (in	ncluding materials and de	sign)	
Description of project (if replacing an replacementrather than repairof ex			why
Detailed scope of work (formatted as	bulleted list)		
Brochure/cut sheets for proposed rep	placement material(s) and,	or product(s), as applica	ble

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@D

P2 - BUILDING PERMIT APPLICATION

	Date: 03.29.22
PROPERTY INFORMATION	
	#:Stories: <u>7</u>
AKA: DAC Lot(s): Subdiv	ision:
Parcel ID#(s): 01000275	Lot Depth:
Current Legal Use of Property: Commercial 26 Proposed Use: Cor	mmercial 26
Are there any existing buildings or structures on this parcel?	□ No
PROJECT INFORMATION	Correct Violetiese
Permit Type: New Alteration Addition Demolition	
Foundation Only Change of Use Temporary Use Other:	
Revision to Original Permit #: BLD2022_00383 / BLD2022_01557 (Original permit has	
Description of Work (Describe in detail proposed work and use of property, attach work Abbey Bowling Center renovation and underground addition. New HVAC units will be added @ street level along John R. in a newly designed and are	
New on-street mechanical units to be: kitchen exhaust hood (x2), Make-up-air unit, Condensing U	
MBC use change	
Included Improvements (Check all applicable; these trade areas require separate perm	· <u></u>
HVAC/Mechanical Electrical Plumbing Fire Sprinkler Sy	stem Fire Alarm
Structure Type	
New Building Existing Structure Tenant Space Garage	
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 6	01)
Estimated Cost of Construction \$ \$	By Department
Structure Use	
Residential-Number of Units: Office-Gross Floor Area Industria	
Commercial-Gross Floor Area: Institutional-Gross Floor Area Other	r-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	
(must be correct and in detail). SHOW ALL streets abutting lot, indicate front of lot 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:	
Current Legal Land Use: Proposed Use:	
Permit#: Date Permit Issued: Permit Cos	
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:	
N. W.	
Other: Date: Notes:	

IDENTIFICATION (All Fields Required)	
Property Owner/Homeowner	operty Owner/Homeowner is Permit Applicant
Name: James Capo	Company Name: DAC
Address: 241 Madison Street	City: Detroit State: MI Zip: 48302
Phone: (240) 904 7263	Mobile: (248) 904. 7263
Driver's License #: C100 367, 119 660	Email: JCAPO @ CAPODESIGNEPOUP.
Contractor is Permit Ap	plicant
Representative Name:	Company Name:
	City: State: Zip:
Phone: Mobile:	Email:
City of Detroit License #:	
TENANT OR BUSINESS OCCUPANT	
Name: Phone:	Email:
ARCHITECT/ENGINEER/CONSULTAN	Architect/Engineer/Consultant is Permit Applicant
	egistration#: 1301067715 Expiration Date: 2024
Address: 160 W. Fort St. Ste. 400	City: Detroit State: MI Zip: 48226
313 /63 5151	otate.
Phone: 313.403.3131 Mobile: 313.99	99.5156 Fmail: dcarter@rossetti.com
HOMEOWNER AFFIDAVIT (Only red I hereby certify that I am the legal owner and o	29.5156 Email: dcarter@rossetti.com quired for residential permits obtained by homeowner.) poccupant of the subject property and the work described
HOMEOWNER AFFIDAVIT (Only red I hereby certify that I am the legal owner and o on this permit application shall be completed be requirements of the City of Detroit and take ful inspections related to the installation/work here other person, firm or corporation any portion o	equired for residential permits obtained by homeowner.) occupant of the subject property and the work described by me. I am familiar with the applicable codes and II responsibility for all code compliance, fees and ein described. I shall neither hire nor sub-contract to any of the work covered by this building permit.
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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.