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 DATE: 6/16/22 2 Woodward Avenue, Suite 808 Detroit, Michigan 48226 **PROPERTY INFORMATION** ADDRESS(ES): 2151 Seminole AKA: Ralph E. Burnham House PARCEL ID: 17008202 HISTORIC DISTRICT: Indian Village Windows/ Walls/ Roof/Gutters/ Porch/Deck/ SCOPE OF WORK: **Painting** Addition Siding Chimney Balcony (Check ALL that apply) Major Alteration Site Improvements Demolition Signage Building (3+ scope items) (landscape, trees, fences, patios, etc.) BRIEF PROJECT DESCRIPTION: **APPLICANT IDENTIFICATION** Property Owner/ Tenant or Architect/Engineer/ Contractor **Business Occupant** Homeowner Consultant NAME: Aislinn Scofield COMPANY NAME: N/A ZIP: 48214 ADDRESS: 2151 Seminole St. CITY: Detroit STATE: MI MOBILE: (415) 948-1823 PHONE: None EMAIL: aislinn.scofield@gmail.com **PROJECT REVIEW REQUEST CHECKLIST** Please attach the following documentation to your request: NOTE: *PLEASE KEEP FILE SIZE OF ENTIRE SUBMISSION UNDER 30MB* Based on the scope of work, additional **Completed Building Permit Application** documentation may be required. (highlighted portions only) See www.detroitmi.gov/hdc for scopeePLANS Permit Number (only applicable if you've already I specific requirements. applied for permits through ePLANS) 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)

SUBMIT COMPLETED REQUESTS TO: HDC@DETROITMI.GOV

Upon receipt of this documentation, staff will review and inform you of the next steps toward obtaining your building

Brochure/cut sheets for proposed replacement material(s) and/or product(s), as applicable

permit from the Buildings, Safety Engineering and Environmental Department (BSEtED) to perform the work.

Detailed scope of work (formatted as bulleted list)

P2 - BUILDING PERMIT APPLICATION

Date: PROPERTY INFORMATION Floor: Suite#: Stories: Address: 2151 Seminole AKA: Ralph E. Burnham House Lot(s): Subdivision: Parcel ID#(s): 17008202 Total Acres: .3008 Lot Width: 76' Lot Depth: 172' Current Legal Use of Property: Single Family Res.-Garage Proposed Use: Single Family Res.-Garage Are there any existing buildings or structures on this parcel? Yes PROJECT INFORMATION New Alteration Addition Demolition Correct Violations Permit Type: Foundation Only Change of Use Temporary Use Other: (Original permit has been issued and is active) Revision to Original Permit #: Description of Work (Describe in detail proposed work and use of property, attach work list) Re-side garage gables, install new garage does twindow, install new garage electrical, install new garage patio, install new Juste bin enclosure, install new backyard porth. 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? (e.g. interior demolition or construction to new walls) Use Group: N/A-Res. Type of Construction (per current MI Bldg Code Table 601) N/A Michigan Res. Cale April 185.

Estimated Cost of Construction \$ 50,000.00 \$ Estimated Cost of Construction \$ 50,000.00 Residential-Number of Units: 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: Fees Due: DngBld? No Permit Description: Proposed Use: Current Legal Land Use: Permit#: _____ Date Permit Issued: _____ Permit Cost: \$ _____ Zoning Grant(s): _____ Zoning District: Yes No (attach zoning clearance) Lots Combined? Revised Cost (revised permit applications only) Old \$______ New \$_____ Structural: _____ Date: _____ Notes: _____ _____ Date: _____ Notes: _____ Zoning: Date: Notes: Other:

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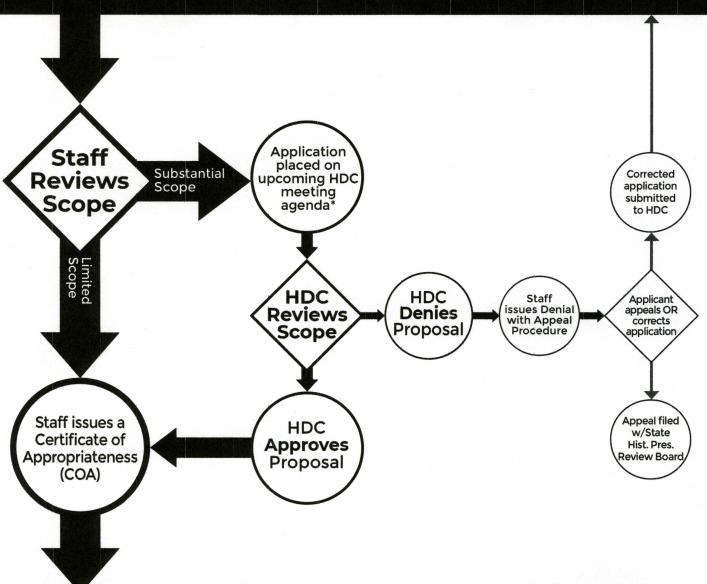
	IDENTIFICATION (All Fields Required)
	Property Owner/Homeowner is Permit Applicant
	Name: Aislinn Scofield Company Name: NIA
	Address: 2151 Seminole St. City: Detroit State: MI Zip: 48214
	Phone: (415) 948 - 1823
K	Driver's License #: 5 143 036 115 969 Email: aisling Scofield @ amail com
	Contractor Contractor is Permit Applicant
	Representative Name: Company Name:
	Address: State: Zip:
	Phone: Email:
	City of Detroit License #:
	Towart is Boymit Applicant
	TENANT OR BUSINESS OCCUPANT Tenant is Permit Applicant
	Name:Phone:Email:
	ARCHITECT/ENGINEER/CONSULTANT Architect/Engineer/Consultant is Permit Applicant
	Name: Josep Fligger State Registration#: Expiration Date:
	Address: 130 W. Parkhinst Pl. City: Detroit State: MI Zip: 48203
	Phone: (3/3)4 Mobile: (3/3)409-7108 Email: fligger 850 comcast-net
	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: Aisling Scoticle Signature: Aisling Godield Date: 6/16/22
	Subscribed and worn to before me this 1 day of 20 ZZ A.D. Way ul County, Michigan
	Signature: My Commission Expires:
	PERMIT APPLICANT SIGNATURE
	I hereby certify that the information on this application is true and correct. I have reviewed all deed My Comm. Expires.
	restrictions that may apply to this construction and am aware of my responsibility thereunder. I
	certify that the proposed work is additionated by the owner of the record and rhave been dutionated.
	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: Assim Scolield Signature: Assimple Confield Poate: 6/16/22
	(office of the control of the contr
K	Driver's License #: 5/43 036 //5 9/69 Expiration: /2 · 22 · 2022
	Subscribed and sworn to before me this 14 day of Time 20 2 A.D. Worne County, Michigan
	Signature: Notary Public) Commission Expires: 1-5-2077
	Section 23a of the state construction code act of 1972, 1972PA230, MCL 125.1523A,
	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.

DETROIT

This application can also be completed online. Visit detroitmi.gov/bseed/elaps for more information.

HISTORIC DISTRICT COMMISSION REVIEW & PERMIT PROCESS





OBTAIN BUILDING PERMIT

FROM BUILDINGS, SAFETY ENGINEERING AND ENVIRONMENTAL DEPT. (BSEED)

FIND OUT MORE AT: WWW.detroitmi.gov/hdc

^{*} THE **COMMISSION MEETS REGULARY AT LEAST ONCE PER MONTH,** TYPICALLY ON THE SÉCOND WEDNESDAY OF THE MONTH.

(SEE WEBSITE FOR MEETING SCHEDULE/AGENDAS)