

City of Detroit Historic District Commission

APPLICATION FOR REPLACEMENT OF HISTORIC SIDING

Instructions: Please complete this application and return with your written estimates, documentation, and completed City of Detroit Application for Building Permit No. 2 to Detroit Historic District Commission, 65 Cadillac Square, Suite 1300 Detroit, Michigan 48226. You may also fax this form to (313) 224-1310. **Please note that your application will not be processed until all the required information has been received.**

Property Loca	tion:			
	(Number)	(Street)		
Property Own	er			
Owner Address	3:			
	(Street)	(City)	(State)	(Zip)
Telephone:				
	(Home)	(Business)	(Fax)	
Applicant:				
Applicant Add	ess:			
	(Street)	(City)	(State)	(Zip)
Telephone:				
	(Home)	(Business)	(Fax)	
Signature of A	pplicant:			
			(Date)	

Application Deadline: Historic District Commission meets on the second Wednesday of each month. Application material must be completed and submitted three (3) Mondays before each Commission meeting. For a list of meeting dates and application deadline dates for the year, please visit our website at www.ci.detroit.mi.us/historic.

Please use the enclosed criteria checklist as a guide to completing your application. Incomplete applications cannot be reviewed and will be returned to you for more information. If you have any questions or concerns, you may contact a Commission staff member at (313) 628-0194 or (313) 224-8907 or (313) 224-6536.

HDC Staff Use Only			
Date Received	App. #	Date Action Taken	Action

Submittal Criteria Checklist

	A completed City of Detroit Application for Building Permit #2;				
	A brochure or other information giving the color, materials, dimension of the proposed replacement siding;				
	Copies of two (2) written estimates from different companies for the repair and painting of the existing siding;				
	Copies of two (2) written estimates from different companies for the replacement and painting of the siding in matching materials;				
	Copies of two (2) written estimates from different companies for the replacement of the siding with an alternate (synthetic) material;				
	Detailed photographs showing deterioration of the original siding (if you cannot provide photos, Commission staff can take the photos by appointment at your request); and				
	A letter from the owner or occupant stating why the siding must be replaced.				
Copies of actual written estimates are <u>REQUIRED</u>					
Repair	Estimate #1 <u>\$</u> Company Name				
Repair	Estimate #2 <u>\$</u> Company Name				
Replacement to Match #1 \$ Company Name					
Replacement to Match #2 \$ Company Name					
Alternate Material Replace #1 \$ Company Name					
Alternate Material Replace #1 \$ Company Name					
Preferred Action: Cost \$					

Company Name