

 CITY OF ST. CHARLES ILLINOIS • 1834	HISTORIC PRESERVATION COMMISSION AGENDA ITEM EXECUTIVE SUMMARY			
	Agenda Item Title/Address:		COA: 105 E Main St.	
	Significance:		Significant	
	Petitioner:		Curt Hurst	
	Project Type:		Storefront	
	PUBLIC HEARING			MEETING 9/18/24
Agenda Item Category:				
	Preliminary Review		Grant	
X	Certificate of Appropriateness (COA)		Other Commission Business	
	Landmark/District Designation		Commission Business	
Attached Documents:			Additional Requested Documents:	
Application, plans				
Project Description:				
Install new aluminum storefront system and windows.				
Staff Comments:				
Recommendation / Suggested Action:				
Provide feedback and recommendation on approval of the COA				

APPLICATION FOR COA REVIEW
HISTORIC PRESERVATION "CERTIFICATE OF APPROPRIATENESS"



COMMUNITY & ECONOMIC DEVELOPMENT DEPARTMENT / CITY OF ST. CHARLES

(630) 377-4443

To be filled out by City Staff

Permit #: _____ -- _____ Date Submitted: ____/____/____ COA # _____ -- _____ Admin. Approval: _____

APPLICATION INFORMATION

Address of Property: 105 E Main Street

Use of Property: ☒ Commercial, business name: Rock n' Ravioli

☐ Residential ☐ Other: _____

Project Type:

☒ Exterior Alteration/Repair

☒ Windows

☐ Doors

☐ Siding - Type: _____

☐ Masonry Repair

☐ Other _____

☐ Awnings/Signs

☐ New Construction

☐ Primary Structure

☐ Additions

☐ Deck/Porch

☐ Garage/Outbuilding

☐ Other _____

☐ Demolition

☐ Primary Structure

☐ Garage/Outbuilding

☐ Other _____

☐ Relocation of Building

Description:

Replace broken store front (see attached detail for new installation)

Applicant Information:

Name (print): STC Arcada

Address: 5 E Main Street

Phone: 630-330-7215

Email: curt@frontierdevelopmentgroup.com

Applicant is (check all that apply):

☐ Property Owner

☐ Business Tenant

☐ Project contractor

☐ Architect/Designer

Property Owner Information (if not the Applicant)

Name (print): same

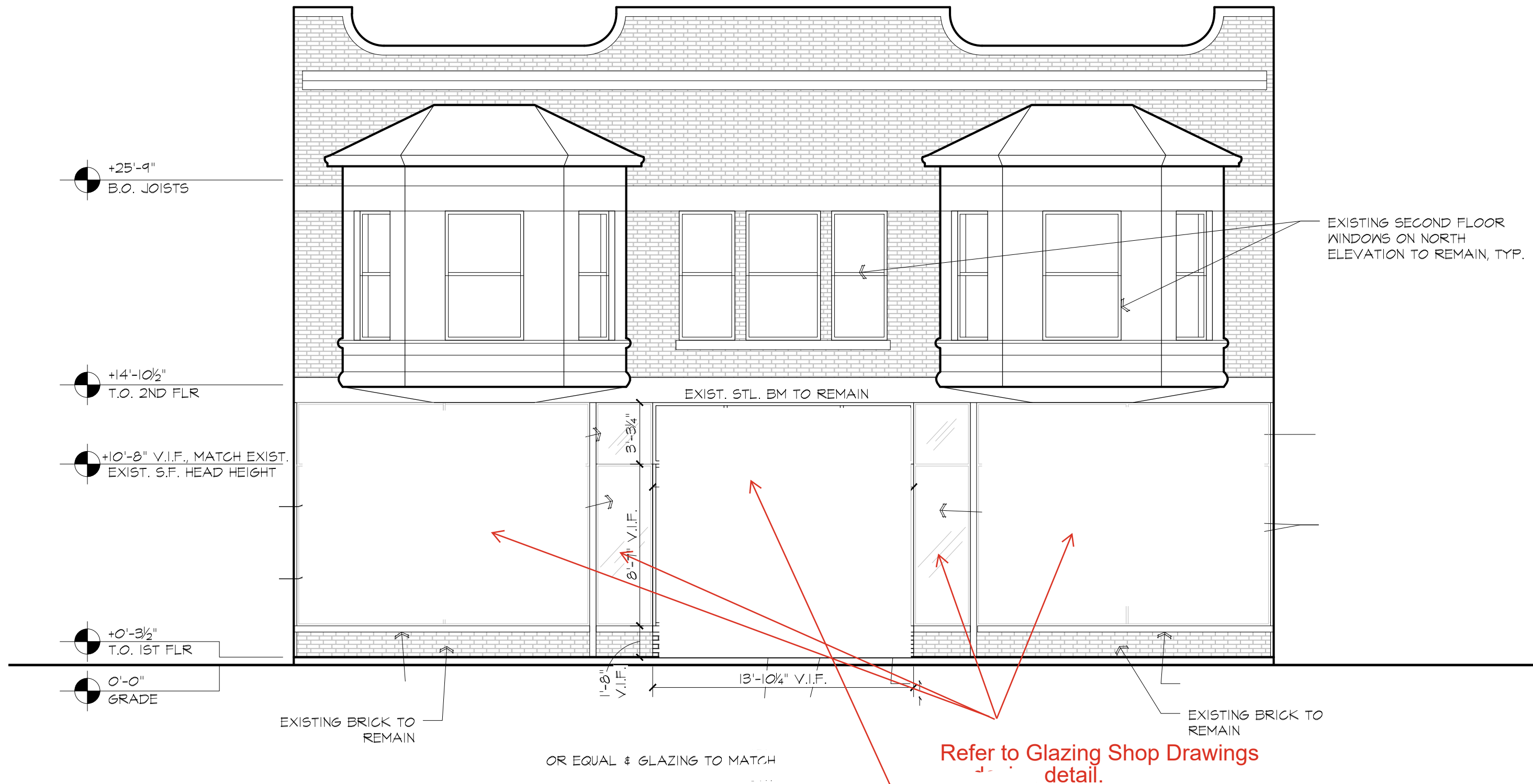
Address: _____

Signature: 

APPLICANT/AUTHORIZED AGENT SIGNATURE

I agree that all work shall be in accordance with the plans, specifications and conditions which accompany this application, and I have read and understand the Historic Preservation COA General Conditions.

Signature:  Date: 09/12/2024



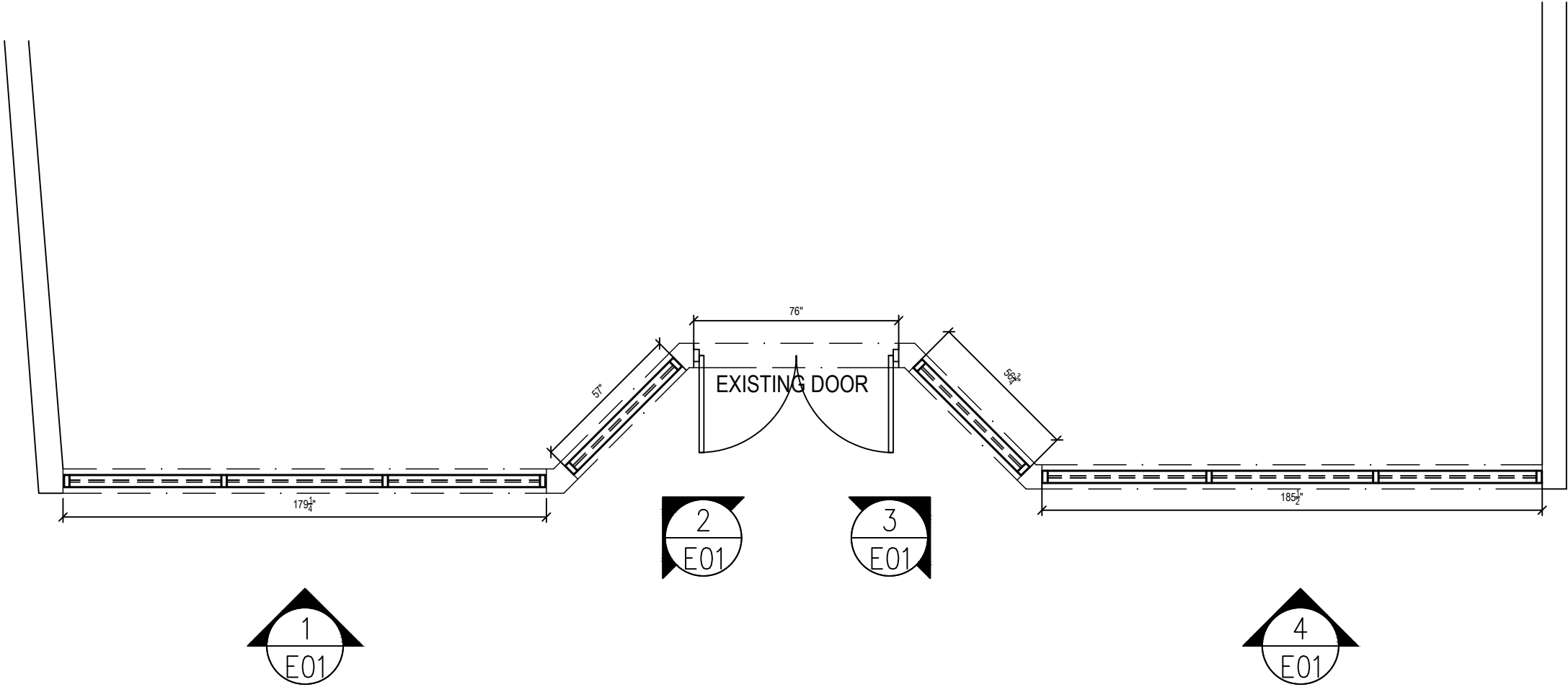
1

NORTH ELEVATION

SCALE: 3/16" = 1'-0"

LOCATION 05 E. MAIN STREET
ST. CHARLES, IL 60174

PLAN #: 1
PROJECT# 4026



Broken Glass, Inc.

455 N . ARTESIAN AVE,
CHICAGO, IL 60612
INFO@BROKENGGLASSINC.COM
P: (312) 733-7003
F: (312) 733-7004

DESCRIPTION OF REVISIONS			
NO.	DATE	BY	

PROJECT: ARCADIA ST CHARLES 109 E Main St, CHARLES, IL		ARCHITECT: N/A	
		PHASE: FOR APPROVAL	SUBMITTAL DATE: 09/05/2024
GENERAL CONTRACTOR: FRONTIER DEVELOP., LLC 1 EAST MAIN STREET ST. CHARLES, IL 60174 PH:(xxx) xxx-xxxx,		ARCHITECT: N/A xx xx PH:(xxx) xxx-xxxx	

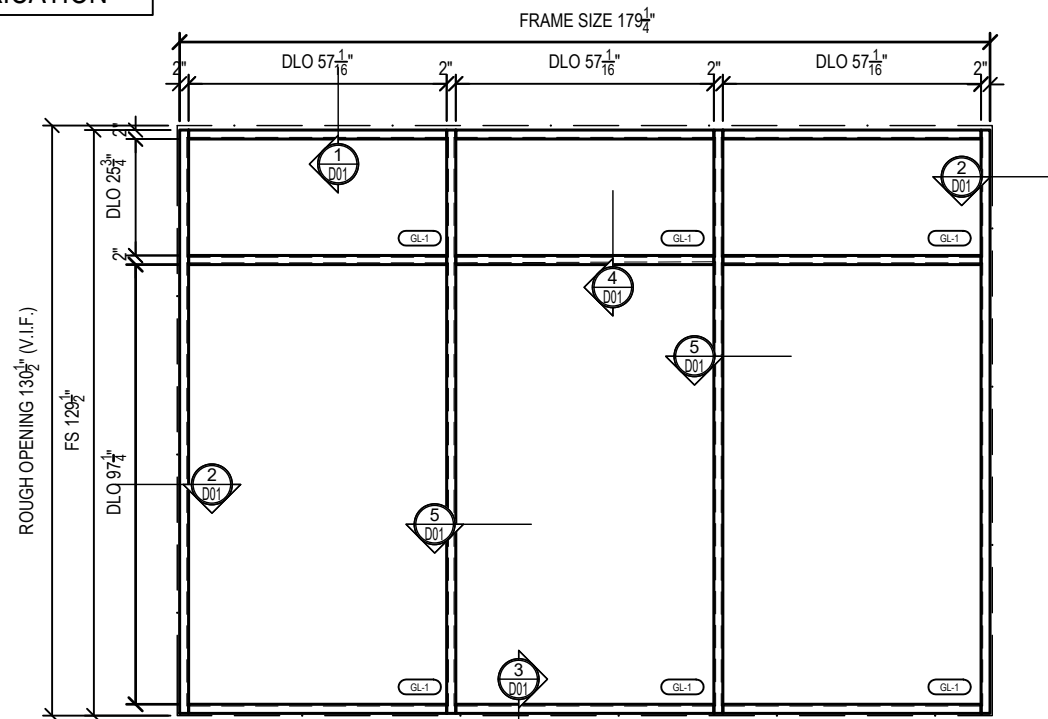
CONFIDENTIAL AND PROPRIETARY
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SHEET TITLE:
FLOOR PLAN

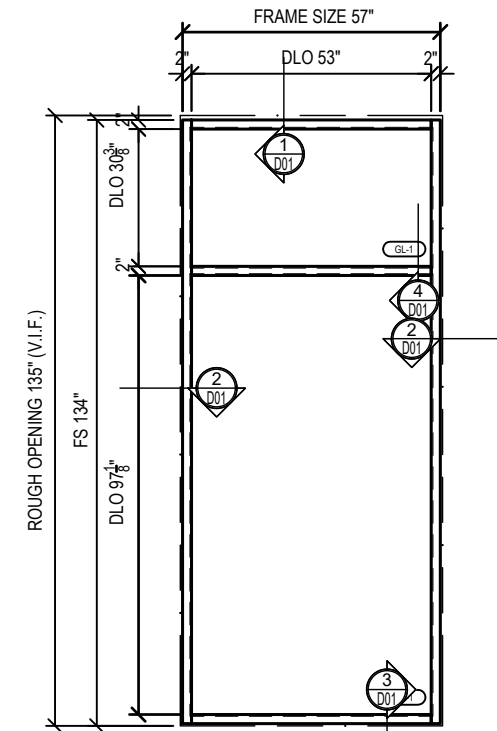
DRAWN: TI	SCALE: NO SCALE
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SHEET NUMBER:
FP01

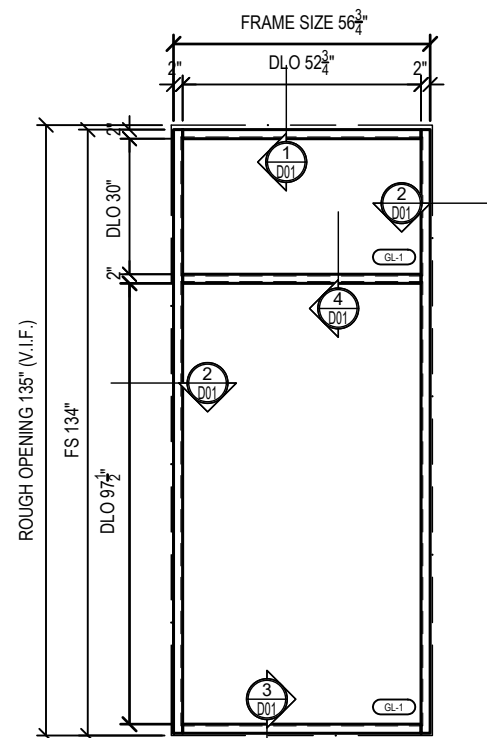
ALL ROUGH OPENING DIMENSIONS TO BE
FIELD MEASURED PRIOR TO FABRICATION



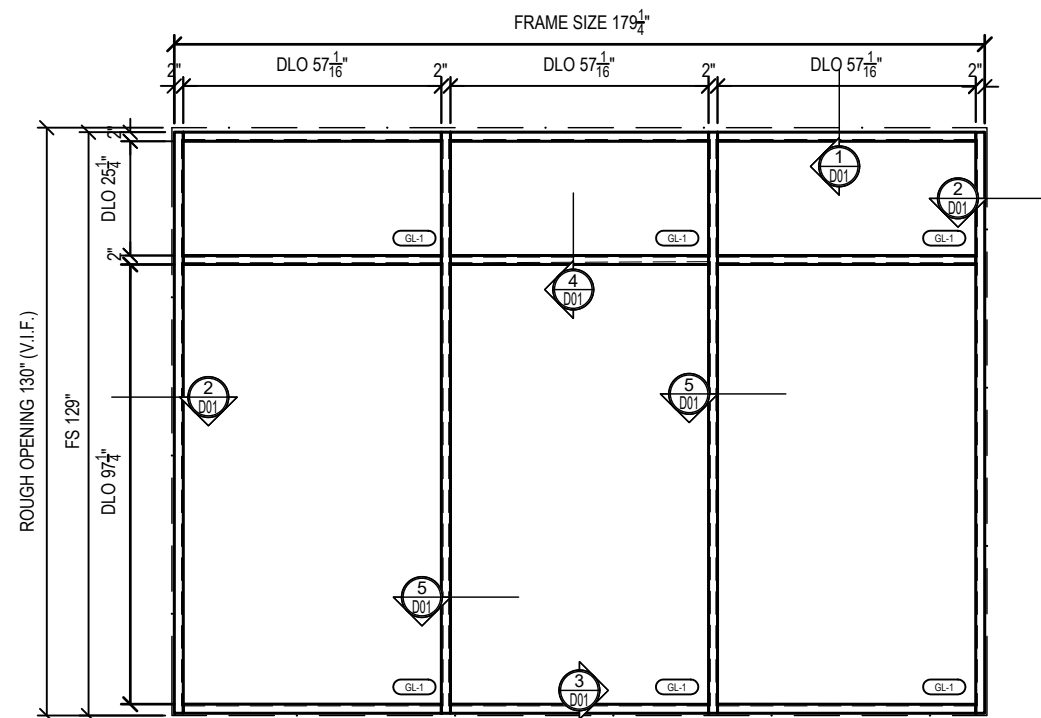
10 EXTERIOR STOREFRONT
QTY: 1-THUS
FRAME: AF1



10 EXTERIOR STOREFRONT
QTY: 1-THUS
FRAME: AF1



10 EXTERIOR STOREFRONT
QTY: 1-THUS
FRAME: AF1



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QTY: 1-THUS
FRAME: AF1

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155 N. ARTESIAN AVE,
CHICAGO, IL 60612
INFO@BROKENGLASSINC.COM
P: (312) 733-7003
F: (312) 733-7004

[illegible]

PROJECT: **ARCADIA ST CHARLES**
109 E Main St, CHARLES, IL

GENERAL CONTRACTOR:
FRONTIER DEVELOP., LLC
1 EAST MAIN STREET
ST. CHARLES, IL 60174
PH:(XXX) XXX-XXXX,

N/A
XX
XX, XX
PH:(XXX) XXX-

FOR APPROVAL

SUBMITTAL DATE:
09/05/2024

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SHEET TITLE:
EXTERIOR
STOREFRONT
ELEVATIONS

RAWN:	SCALE:
TI	NO SCALE

SHEET NUMBER:
E01