

|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                                                           |  |                                           |                            |  |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------|--|-------------------------------------------|----------------------------|--|----------|
|                                                                                                                                                                                                                                                                                                                                                                 |                                      | <b>HISTORIC PRESERVATION COMMISSION<br/>AGENDA ITEM EXECUTIVE SUMMARY</b> |  |                                           |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | <b>Agenda Item Title/Address:</b>                                         |  | COA: 103 S. 4 <sup>th</sup> St. (windows) |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | <b>Proposal:</b>                                                          |  | Replace windows                           |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | <b>Petitioner:</b>                                                        |  | David Bernat                              |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | <b>Please check appropriate box (x)</b>                                   |  |                                           |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      | <b>PUBLIC HEARING</b>                                                     |  |                                           | <b>MEETING<br/>8/17/16</b> |  | <b>X</b> |
| <b>AGENDA ITEM CATEGORY:</b>                                                                                                                                                                                                                                                                                                                                                                                                                     |                                      |                                                                           |  |                                           |                            |  |          |
| X                                                                                                                                                                                                                                                                                                                                                                                                                                                | Certificate of Appropriateness (COA) |                                                                           |  | Façade Improvement Plan                   |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Preliminary Review                   |                                                                           |  | Landmark/District Designation             |                            |  |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Discussion Item                      |                                                                           |  | Commission Business                       |                            |  |          |
| <b>ATTACHMENTS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                                                           |  |                                           |                            |  |          |
| Photos<br>Architectural Survey page                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                                                           |  |                                           |                            |  |          |
| <b>EXECUTIVE SUMMARY:</b>                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                                                           |  |                                           |                            |  |          |
| <p>Proposed is replacement off all of the windows on this structure. Existing windows are double-hung with storms. According to the applicant the windows are in poor condition; some do not open, some are cracked, and some have glass missing.</p> <p>The proposed replacement windows are single-hung vinyl. The applicant will bring a sample to the meeting. Also proposed is capping the trim around the windows with white aluminum.</p> |                                      |                                                                           |  |                                           |                            |  |          |
| <b>RECOMMENDATION / SUGGESTED ACTION:</b>                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                                                           |  |                                           |                            |  |          |
| Provide feedback and recommendations on approval of the COA.                                                                                                                                                                                                                                                                                                                                                                                     |                                      |                                                                           |  |                                           |                            |  |          |

East Elevation:



North Elevation:





West Elevation:













ST. CHARLES HISTORIC PRESERVATION COMMISSION

# ARCHITECTURAL SURVEY ST. CHARLES CENTRAL DISTRICT ST. CHARLES, ILLINOIS

DIXON ASSOCIATES / ARCHITECTS

## ARCHITECTURAL INTEGRITY

|                                                      | 1                                   | 2                        | 3                        |
|------------------------------------------------------|-------------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> Unaltered                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Minor Alteration | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Major Alteration            | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Additions                   | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| Sensitive to original                                | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| Insensitive to original                              | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

1: first floor; 2: upper floors; 3: roof/cornice

## ARCHITECTURAL SIGNIFICANCE

☐ Significant

☒ Contributing

☐ Non-Contributing

## BUILDING CONDITION

☒ Excellent: Well-maintained

☐ Good: Minor maintenance needed

☐ Fair: Major repairs needed

☐ Poor: Deteriorated

## ARCHITECTURAL DESCRIPTION

Style: Queen Anne

Date of Construction: 1880-1910

Source: A Field Guide to American Houses

### Features:

Front hip roof to cross gable transverse roof. Two story wood frame with shingle texture in gabled and bracketed dormer and gabled front entry porch. Pair of windows at front appear altered due to shingled cap width not relating.



### Address:

103 South 4th Street/  
403 West Walnut Street

### Representation in Existing Surveys:

☐ Federal

☐ State

☐ County

☐ Local

Block No. 13

Building No. 1

### SURVEY DATE:

MAY 1994

ROLL NO. 3

NEGATIVE NO. 34



ST. CHARLES HISTORIC PRESERVATION COMMISSION

**ARCHITECTURAL SURVEY**  
**ST. CHARLES CENTRAL DISTRICT**  
**ST. CHARLES, ILLINOIS**

DIXON ASSOCIATES / ARCHITECTS

CONTINUATION SHEET NO: 1



ROLL NO. 11

NEGATIVE NO. 28

**Address:**

103 South 4th Street/  
403 West Walnut Street

**Remarks:**

North Elevation.

Block No. 13

Building No. 1

**Address:**

**Remarks:**

Block No.

Building No.

ROLL NO.

NEGATIVE NO.