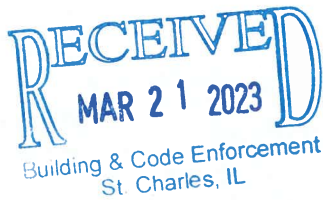
 <p>CITY OF ST. CHARLES ILLINOIS • 1834</p>	HISTORIC PRESERVATION COMMISSION AGENDA ITEM EXECUTIVE SUMMARY			
	Agenda Item Title/Address:		COA: 511 Illinois Ave.	
	Significance:		Contributing	
	Petitioner:		Terry Rice, Banner Up Signs	
	Project Type:		Sign	
	PUBLIC HEARING			MEETING 4/5/23
Agenda Item Category:				
	Preliminary Review		Grant	
X	Certificate of Appropriateness (COA)		Other Commission Business	
	Landmark/District Designation		Commission Business	
Attached Documents:			Additional Requested Documents:	
Application, Sign Info, Architectural Survey				
Project Description:				
Proposed is to install a non-illuminated Alupanel wall sign				
Staff Comments:				
Recommendation / Suggested Action:				
Provide feedback and recommendations on approval of the COA.				



Historic



CITY OF ST CHARLES
Application for Building Permit for Sign

DEPARTMENT: BUILDING & CODE ENFORCEMENT

PHONE: (630) 377-4406

Application Date: March 8, 2023 Parcel No. _____ Permit No. 2023 00442

Please Print All Information

I, Terry Rice / Banner Up Signs, do hereby apply for a permit for the following work located

at 511 Illinois Ave. St. Charles, IL 60174, Lineal feet of building frontage/tenant space 25.3

Number of square feet of proposed sign 12.3 Estimated cost of sign \$400

Description of proposed sign Qty. 1 - 24" x 74" Single Face Alupanel sign (Non Illuminated) installed flush to facade using mechanical fasteners

Name of business at this location: White Oak Family Wellness

Check List for Submittal of Application:

- ☐ Is your property located in the Historic Preservation District? Yes/No If yes, your application and plans will need to be reviewed by the Historic Preservation Committee. Your drawings or plans will need to be in color for their review.
- ☐ Building Permit Application – Completely Filled Out.
- ☐ Two-2 sets of detailed drawings showing size, height, and type of materials.
- ☐ Two-2 copies of the Plat of Survey showing the sign location with the setbacks.
- ☐ Freestanding signs: Construction details, foundation plans, electrical information and landscape plans.
- ☐ Wall signs: Detail drawings of cabinet, electric, and fasteners.
- ☐ **Permanent Illuminated - \$125.00 + 2.25 Per a square foot of sign area**
- ☐ **Permanent Non-Illuminated - \$100.00 + 1.50 Per a square foot of sign area**
- ☐ **PAYMENT IN CHECK OR CASH IS TO ACCOMPANY THIS APPLICATION AND PLANS.**

Refer to Information Packet for Detailed Information

Owner of Property

Name: Dr. Neha Shah

Address: 511 Illinois Ave.

City/State/Zip Code: St. Charles, IL 60174

Email: drshah@whiteoakwell.com

Telephone NO. 630-442-0057

Applicant/Contact

Name: Terry Rice / Banner Up Signs

Address: 1170 E. State Street

City/State/Zip Code: Sycamore, IL 60178

Email: terry@bannerupsigns.com

Telephone NO. 815-899-9211 Ext. 404

General Contractor

Name: Banner Up Signs

Address: 1170 E. State Street

City/State/Zip Code: Sycamore, IL 60178

Email: terry@bannerupsigns.com

Telephone NO. 815-899-9211 Ext. 404

Electric Contractor

Name: _____

Address: _____

City/State/Zip Code: _____

Email: _____

Telephone NO. _____



PROPOSED VIEW



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Office: (815)899-9211 Ext: 404
1170 E. State St. Sycamore, IL 60178

PROJECT: RELOCATE EXISTING SIGNS TO NEW ADDRESS

CLIENT: WHITE OAK FAMILY WELLNESS
511 Illinois AveSt. Charles, IL 60174

SALES: JON KHUN

DESIGN: TR

ORIGINAL: 1-10-2023

REVISION:

SPECIFICATIONS:

QUANTITY: 1(ONE) SINGLE FACE HDU SIGN

REMOVAL: 409 Illinois Ave Suite 1-C St Charles

INSTALL: 511 Illinois AveSt. Charles, IL 60174

MOUNTING: SIGN ATTACHED TO FACADE USING MECHANICAL FASTENERS

\$482.50 INCLUDES REMOVAL, PERMIT & INSTALL OF EXTERIOR WALL SIGN

White Oak Wellness_Exterior Signage Relocate_W04

CLIENT APPROVAL

QUOTE \$482.50 INCLUDES INSTALL & PERMITTING

APPROVED ☐

REVISIONS REQUIRED ☐

CLIENT SIGNATURE: _____

SITE MAP



STREET VIEW - 1



STREET VIEW - 2



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SIGNS > VEHICLES > PROMOS

Office: (815)899-9211 Ext: 404
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SALES: JON KHUN

DESIGN: TR

ORIGINAL: 1-10-2023

REVISION:

SITE MAP

White Oak Wellness_Exterior Signage Relocate_W04

CLIENT APPROVAL

QUOTE

APPROVED ☐

REVISIONS REQUIRED ☐

CLIENT SIGNATURE: _____



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 checked="" type="checkbox"/>	<input checked="" 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 ☒ Landmarked
- ☐ Contributing
- ☐ Non-Contributing

BUILDING CONDITION

- ☒ Excellent: Well-maintained
- ☐ Good: Minor maintenance needed
- ☐ Fair: Major repairs needed
- ☐ Poor: Deteriorated

ARCHITECTURAL DESCRIPTION

Style: Greek Revival

Date of Construction: 1840

Source: St. Charles Historical Museum

Features:

Gable end roof with broken pediment. Classical details at entry may have been altered. Home of Dr. Richards of the Franklin Medical School.



Address:

511 East Illinois Avenue

Representation in Existing Surveys:

- ☐ Federal
- ☐ State
- ☐ County
- ☒ Local

Block No. 61

Building No. 1

SURVEY DATE:

MAY 1994

ROLL NO. 9

NEGATIVE NO. 15