

	HISTORIC PRESERVATION COMMISSION AGENDA ITEM EXECUTIVE SUMMARY			
	Agenda Item Title/Address:	COA: 609 State St.		
	Proposal:	Siding		
	Petitioner:	Richard Compian		
Please check appropriate box (x)				
	PUBLIC HEARING		MEETING 1/16/19	X
AGENDA ITEM CATEGORY:				
<input checked="" type="checkbox"/>	Certificate of Appropriateness (COA)		Façade Improvement Plan	
	Preliminary Review		Landmark/District Designation	
	Discussion Item		Commission Business	
ATTACHMENTS:				
COA Application				
Architectural Survey Page				
Work Order Form				
Photos of House w/ old siding				
Photos with siding removed				
EXECUTIVE SUMMARY:				
<p>Proposed is the replacement of aluminum siding with .46 gauge Napco traditional vinyl siding. Removal of the aluminum siding started before a permit was issued, but work was stopped. Insulation and house wrap have been added to the home to provide weather proofing.</p>				
RECOMMENDATION / SUGGESTED ACTION:				
Provide feedback and recommendations 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

ST. CHARLES
SINCE 1834

To be filled out by City Staff

Permit #: 19 - 29432 Date Submitted: 8/19/19 COA # 19 Admin. Approval: _____

APPLICATION INFORMATION

Address of Property: 609 State St, St Charles, IL

Use of Property: Commercial, business name: _____

Residential Other: _____



Project Type:

- | | | |
|---|---|---|
| <input type="checkbox"/> Exterior Alteration/Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Windows | <input type="checkbox"/> Primary Structure | <input type="checkbox"/> Primary Structure |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Additions | <input type="checkbox"/> Garage/Outbuilding |
| <input checked="" type="checkbox"/> Siding - Type: <u>vynal</u> | <input type="checkbox"/> Deck/Porch | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Masonry Repair | <input type="checkbox"/> Garage/Outbuilding | <input type="checkbox"/> Relocation of Building |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Awnings/Signs | | |

Description:

Siding replacement, Adding insulation and house wrap.

Applicant Information:

Name (print): Richard Compian

Address: 2021 Anjali way

Phone: 630 441 5745

Email: compianmae@outlook.com

Applicant is (check all that apply):

- Property Owner
 Business Tenant
 Project contractor
 Architect/Designer

Property Owner Information (if not the Applicant)

Name (print): Bruce Janus

Address: 609 State St, St Charles

Signature: Sharon Janus

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: [Signature] Date: 8/19



ARCHITECTURAL SURVEY

NEAR WEST HISTORIC DISTRICT
ST. CHARLES, ILLINOIS

ST. CHARLES HISTORIC PRESERVATION COMMISSION

Primary Structure

ADDRESS 609 State Street

ROLL-IMAGE # 70552 - 36

CD-IMAGE # 0602 - 36



ARCHITECTURAL SIGNIFICANCE

- Significant
- Contributing
- Non-Contributing
- Potential for Individual National Register Designation

BUILDING CONDITION

- Excellent
- Good
- Fair
- Poor

ARCHITECTURAL INFORMATION

Architectural Style/Type: National?

Exterior Walls (Current): Aluminum

Architectural Features: _____

Exterior Walls (Original): Clapboard

Date of Construction: 1915

Foundation: Parged masonry/concrete

Source: Township Assessor's Office

Roof Type/Material: Cross gable/Asphalt shingle

Overall Plan Configuration: Compound/mass

Window Material/Type: Aluminum/Double hung

ARCHITECTURAL FEATURES: The original house has been transformed through additions and modifications that make it difficult to see what the original style really was. The front gable end dominates the street elevation. A pair of double hung windows is all that remains of the original design elements apparent from the street.

ALTERATIONS: A 2 story addition to the west side sits on a concrete foundation. A 1 story addition to the south side is somewhat sympathetic with the massing of the original house. A large picture window was installed at the ground floor front elevation replacing the original windows/door.



your MID AMERICA EXTERIORS

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help@yourmidamericaexteriors.com

www.yourmidamericaexteriors.com

WORK ORDER

Name: Bruce Janus

Phone: 630-263-9048

Address: 609 State St, St Charles, IL

Claim#: _____

ROOF

- Remove (full tearoff) old shingles
- Inspect roof for damaged surfaces
- Nail down/replace boards if needed
- Install new pipe jacks/air vents
- Install ice and water shield
- Install roofing felt
- Install new shingles

Type: _____
 Style: _____
 Color: _____

Dumpster side (facing garage)

- ← Left Right →

NOTES: _____

Owner Initials

ALL roof repair and replacement shall be done by the following licensed roofing contractor:

M&M CONSTRUCTION AND DEVELOPMENT INC
 License # 104016012
 (773) 931-9498
 219 FISHING LANE
 WOOD DALE, IL 60191

SIDING

- Remove old siding
- Install fanfold insulation board
- Install air moisture barrier (wrap)
- Install new siding

Type: Napco
 Style: Traditional
 Color: Cordoba olive

NOTES: _____

Owner Initials

FASCIA/SOFFIT

- Remove old fascia
- Install new fascia
- Remove old soffit
- Install new soffit

Type: _____
 Color: _____

Color must be a colored code

NOTES: _____

Owner Initials

GUTTERS/DOWNSPOUTS

- Remove old gutters
- Install new gutters
- Remove old downspouts
- Install new downspouts

Type: _____
 Color: _____

Color must be a colored code

NOTES: _____

Owner Initials

WRAPS

- Wrap outside corners
- Wrap wood door frame(s)
- Wrap wood window frame(s)
- Wrap belly board

Type: _____
 Color: _____

Color must be a colored code

NOTES: _____

Owner Initials

INTERIOR

Owner Initials

DELIVER MATERIALS

- Driveway Lawn
- Other Back wooden deck

This Work Order is for the repair and replacement of this insurance claim's covered damages (the "Work"). The total cost for the Work is the final insurance estimate amount (including all supplemental costs insurer pays for after this Work Order's date). All insurance checks for this claim are for payment of the Work and are due when they are issued. The day after this Work Order's date is the start date and thirty days after the Work Order's is the estimated completion date. This Work Order cannot be terminated after delivery and unpacking of Work materials.

HOMEOWNER

Bruce A. Janus
Signature

1/8/19
Date

WORK ORDER AMOUNT:
(See above)

19,384.40
+ Saps



609

Free
Melania

GOT LOVE?





609

POSTED

No Soliciting

Free
Melania

GOT LOVE?

PLEASE WASH
YOUR HANDS
OCCASIONALLY
Thank you!
1/17/20





