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|  | HISTORIC PRESERVATION COMMISSION AGENDA ITEM EXECUTIVE SUMMARY | | | |
| | Agenda Item Title/Address: | COA: 207 Walnut Ave. | | |
| | Proposal: | New Duplex House | | |
| | Petitioner: | Greg Derrico | | |
| Please check appropriate box (x) | | | | |
| | PUBLIC HEARING | | MEETING 10/3/18 | 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: | | | | |
| Application | | | | |
| Site Plan | | | | |
| Architectural Plans | | | | |
| EXECUTIVE SUMMARY: | | | | |
| <p>The lot at 207 Walnut Ave is currently vacant. Proposed is the construction of a three-story duplex.</p> <p>Full architectural drawings for a COA have been submitted. The applicant has been advised to provide specifications on the exterior building materials.</p> <p>This application was previously discussed at the 9/5/18 meeting and was tabled until the applicant provided a streetscape rendering of the block, as well as a plat showing neighborhood setbacks.</p> <p>No additional information has been provided, but the applicant has requested that the item be placed on the agenda and the Commission move forward with a recommendation.</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

To be filled out by City Staff

Permit #: _____ Date Submitted: 8/31/18 COA # _____ Admin. Approval: _____

APPLICATION INFORMATION

Address of Property: 207 WALNUT AVE

Use of Property: Commercial, business name: _____
 Residential Other: _____

Project Type:

- | | | |
|---|---|---|
| <input type="checkbox"/> Exterior Alteration/Repair | <input checked="" type="checkbox"/> New Construction | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Windows | <input checked="" type="checkbox"/> Primary Structure | <input type="checkbox"/> Primary Structure |
| <input type="checkbox"/> Doors | <input type="checkbox"/> Additions | <input type="checkbox"/> Garage/Outbuilding |
| <input type="checkbox"/> Siding - Type: _____ | <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:

APPLICANT RESIDENTIAL NEW CONSTRUCTION

Applicant Information:

Name (print): DEERLEO CUSTOM HOMES
Address: 311 WALNUT AVE
Phone: 630 377 8100
Email: HOMES@DEERLEOCUSTOMHOMES.COM

Applicant is (check all that apply):

| |
|--|
| <input type="checkbox"/> Property Owner |
| <input type="checkbox"/> Business Tenant |
| <input checked="" type="checkbox"/> Project contractor |
| <input checked="" type="checkbox"/> Architect/Designer |

Property Owner Information (if not the Applicant)

Name (print): MADELEINE HOWE TRUST
Address: 41 W 011 ARLINGTON FIELD DR.
Signature: ELSBURN, ILLINOIS 60119

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: 8/30/18

