



City of Ann Arbor
PLANNING & DEVELOPMENT SERVICES — PLANNING
SERVICES

301 E. Huron Street | P.O. Box 8647 | Ann Arbor, Michigan 48107-8647
 p. 734.794.6265 | f. 734.994.8312 | planning@a2gov.org

ANN ARBOR HISTORIC DISTRICT COMMISSION APPLICATION

Section 1: Property Being Reviewed and Ownership Information

Address of Property: 609 West Huron, Ann Arbor, MI 48103

Historic District: Old West Side

Name of Property Owner (If different than the applicant): Gloria Grapentine

Address of Property Owner: 609 W. Huron, Ann Arbor, MI 48103

Daytime Phone and E-mail of Property Owner: (734) 761-2764 gggrapentine@gmail.com

Signature of Property Owner: Gloria Grapentine Date: 2/24/15

Section 2: Applicant Information

Name of Applicant: Meadowlark Builders, llc

Address of Applicant: 3250 West Liberty, Ann Arbor, MI 48103

Daytime Phone: (734) 332-1500 Fax:(734) 332-1515

E-mail: steven.varnum@gmail.com

Applicant's Relationship to Property: ___owner___ architect ___x___ contractor ___other___

Signature of applicant: Lee Van

Section 3: Building Use (check all that apply)

Residential Single Family _____ Multiple Family _____

Rental _____ Commercial _____ Institutional _____

Section 4: Stille-DeRossett-Hale Single State Construction Code Act

(This item **MUST BE INITIALED** for your application to be **PROCESSED**)

Public Act 169, Michigan's Local Historic Districts Act, was amended April 2004 to include the following language: "...the applicant has certified in the application that the property where the work will be undertaken has, or will have before the proposed completion date, a a fire alarm or smoke alarm complying with the requirements of the Stille-DeRossett-Hale Single State Construction Code Act, 1972 PA 230, MCL 125.1501 to 125.1531."

Please initial here: [Signature]

Section 5: Description of Proposed Changes (attach additional sheets as necessary)

1. Provide a brief summary of proposed changes. _____

Provide an approximately 7'-0" x 26'-1" addition to the side of the home to allow for an accessible bathroom, first floor laundry space and accessible space in the first floor bedroom.

2. Provide a description of existing conditions. _____

Currently the bedroom and bathroom are too small to allow for wheelchair accessibility, and the laundry is located in the basement. There is an existing addition to the rear of the house which we intend to extend and wrap around the side for the new addition. This house and yard have been very well maintained by the homeowner since 1985.

3. What are the reasons for the proposed changes? _____

Our client would like the ability to "age in place" in her current home, and is very likely to be in a wheelchair in the very near future. The intent of this project is to allow her to stay in the home she has lived in for the past thirty years.

4. Attach any additional information that will further explain or clarify the proposal, and indicate these attachments here.

The rear yard of this home contains a very large, 44" diameter Silver Maple tree which we intend to protect by building to the side of the house instead of the rear. See also photos in the submission.

5. Attach photographs of the existing property, including at least one general photo and detailed photos of proposed work area.

STAFF USE ONLY

Date Submitted: _____ Application to _____ Staff or _____ HDC

Project No.: _____ **HDC** _____ Fee Paid: _____

Pre-filing Staff Reviewer & Date: _____ Date of Public Hearing: _____

Application Filing Date: _____ Action: _____ HDC COA _____ HDC Denial

Staff signature: _____ _____ HDC NTP _____ Staff COA

Comments: