

Certificate of Appropriateness Placard

for Raleigh Historic Resources

	Project Description:
216 N BLOODWORTH STREE	Г
Address	 Replace roofing
OAKWOOD	 Install soffit vents
Historic District	•
Historic Property	
093-17-MW	
Certificate Number	
05-31-2017	
Date of Issue	
11-30-2017	
Expiration Date	
This card must be kept pasted in a location within public	
view until all phases of the described project are complete.	
The work must conform with the code of the City of Raleigh	
and laws of the state of North Carolina. When your project	
is complete, you are required to ask for a final zoning	
inspection in a historic district area. Telephone the RHDC office at 832-7238 and commission staff will coordinate	
the inspection with the Inspections Department. If you	Signature, Mulissa R
do not call for this final inspection, your Certificate of Appropriateness is null and void.	Raleigh Historic Development Commission

Pending the resolution of appeals, commencement of work is at your own risk.

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Raleigh Historic Development Commission – Certificate of Appropriateness (COA) Application



DEVELOPMENT SERVICES DEPARTMENT

Development Services Customer Service Center One Exchange Plaza 1 Exchange Plaza, Suite 400 Raleigh, North Carolina 27601 Phone 919-996-2495 eFax 919-996-1831



RALEIGH HISTORIC DEVELOPMENT COMMISSION

			and the second se	
Minor Work (staff review) – 1 copy				For Office Use Only
		_	Transaction #	504602
	er than 25% of Building Squa	are Footage	File #	093-17-MW
	uting Historic Resource		Fee	29.00
All Other			Amount Paid	\$291.00
			Received Dat	· 4/5/17
🗌 Post Approval Re-rev	jor Work (COA Committee review) – 10 copies Additions Greater than 25% of Building Square Footage New Buildings Demo of Contributing Historic Resource All Other st Approval Re-review of Conditions of Approval t Address 216 N Blood worth St. t Address 216 N Blood worth St. t Oull wood rty/Landmark name (if applicable) Dwid # Jennifer Hodge (width in feet) JO (depth in feet) IOG ns that require review by the COA Committee (Major Work), provide addressed, stamped envelopes to owners s within 100 feet (i.e. both sides, in front (across the street), and behind the property) not including the width			
Property Street Address 216	N Blood worth	St.		
Historic District Oallwo	od			
Historic Property/Landmark nam	e (if applicable)			
Owner's Name David	& Jennifer Hode	ge.		
Lot size	(width in feet) 50		(depth in feet)	106
	i.e. both sides, in front (acro			
Property Ad	ldress		Prope	rty Address

I understand that all applications that require review by the commission's Certificate of Appropriateness Committee must be submitted by 4:00 p.m. on the application deadline; otherwise, consideration will be delayed until the following committee meeting. An incomplete application will not be accepted.

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Type or print the following:		
Applicant David & Jennifer 1	todge	
Mailing Address 216 N Bloodwor	rmst.	
City Raleish	State NC	Zip Code 27601
Date 03/24/2017	Daytime Phone (919) 523 - 858	51
Email Address Jo. Hudge @ Um	usic.com	
Applicant Signature	(
Will you be applying for rehabilitation tax credits	s for this project? 🗌 Yes 🛄 No 🏻 Ty	Office Use Only pe of Work <u>60,99</u>
Did you consult with staff prior to filing the appli	lication? Ves 🗆 No	

Des	sign Guidelines - Please cite th	e applicable sections of the design guidelines (<u>www.rhdc.org</u>).
Section/Page	Торіс	Brief Description of Work (attach additional sheets as needed)
3.5	Poofs	Replace old asphalt roofing tiles with new. Install soffit vents to protect roof from excessive moisture buildup materials to be used are referred to in application.

Minor Work Approval (office use only)

Upon being signed and dated below by the Planning Director or designee, this application becomes the Minor Work Certificate of Appropriateness. It is valid until $\frac{\sqrt{30}}{10}$. Please post the enclosed placard form of the certificate as indicated at the bottom of the card. Issuance of a Minor Work Certificate shall not relieve the applicant, contractor, tenant, or property owner from obtaining any other permit required by City Code or any law. Minor Works are subject to an appeals period of 30 days from the date of approval.

Signature (City of Raleigh)

Melitsa Kol

____ Date 5(31/17

TO BE COMPLETED BY APPLICANT			BY CITY STAFF		
	YES	N/A	YES	NO	N/A
Attach 8-1/2" x 11" or 11" x 17" sheets with written descriptions and drawings, photographs, and other graphic information necessary to completely describe the project. Use the checklist below to be sure your application is complete. <u>Minor Work</u> (staff review) – 1 copy <u>Major Work</u> (COA Committee review) – 10 copies					
1. Written description. Describe clearly and in detail the nature of your project.			(
Include exact dimensions for materials to be used (e.g. width of siding, window trim, etc.)			\bigvee_{i}		
2. Description of materials (Provide samples, if appropriate)	D		\checkmark		
 Photographs of existing conditions are required. Minimum image size 4" x 6" as printed. Maximum 2 images per page. 	Ø				
4. Paint Schedule (if applicable)					V
5. <u>Plot plan</u> (if applicable). A plot plan showing relationship of buildings, additions, sidewalks, drives, trees, property lines, etc., must be provided if your project includes any addition, demolition, fences/walls, or other landscape work. Show accurate measurements. You may also use a copy of the survey you received when you bought your property. Revise the copy as needed to show existing conditions and your proposed work.					
6. Drawings showing existing and proposed work					
 Plan drawings Elevation drawings showing the façade(s) Dimensions shown on drawings and/or graphic scale (required) 11" x 17" or 8-1/2" x 11" reductions of full-size drawings. If reduced size is 					C
so small as to be illegible, make 11" x 17" or 8-1/2" x 11" snap shots of individual drawings from the big sheet.					
 Stamped envelopes addressed to all property owners within 100 feet of property not counting the width of public streets and alleys (required for Major Work). Use the <u>Label Creator</u> to determine the addresses. 					\bigvee
8. Fee (See Development Fee Schedule)	9		$\mathbf{\nabla}$		
			\$2	9	





Proposed work is twofold:

1)Replace existing asphalt roofing shingles with new. Replacement shingles are Owens Corning Oakridge Shingles and are onyx black in color. A sample can be found here:

https://www.owenscorning.com/roofing/shingles/oakridge/onyx-black

2) New 4 inch round soffit vents will be installed every 84 inches/7 feet along the soffit to allow airflow to the attic and roof. The contractor said this will extend the life of the roof and help with the overall long term health of the home structure. I have attached a photo example from the contractor of previous installation work. Please see page 2 of this document for vent maker and model contractor plans to use. A sample can be found here:

https://ventmastersstore.com/products/4-round-open-screen-ventwhite?utm_medium=cpc&utm_source=googlepla&variant=5129822340&gclid=Cli3n_z8htMCF QQOaQodOpgLrg









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Maurice Franklin

4" Round Open Screen Vent, white

