



CITY OF THE VILLAGE OF CLARKSTON

375 Depot Road
Clarkston, MI 48346-1418
Phone 248 • 625-1559
Fax 248 • 625-3770

CITY OF THE VILLAGE OF CLARKSTON

Historic District Commission Certificate of Appropriateness

Plans for: 18 North Holcomb St.
Owner: Greg and Ann Wilson
Builder: Owner
Architect: Dennis Berry & Associates, 248-681-3641

Plans approved as submitted by the Commission on 1/14/2004*.
The project consists of the addition of a first floor wrap around porch to the front of the house.
The porch will recreate the original porch once a part of the structure.
The materials used for the project will consist of:

- Wood foundation
- Wood siding
- Wood trim
- Asphalt shingles
- Engineered composite decking that has the appearance of wood.

Chairperson Signature:


Leslie L. Haight

Date:

1/18/2004

*Certificate of appropriateness expires one year from approval date.

Clarkston Historic District - Project Detail Sheet

Address or Property Description 18 N. Holcomb

Applicant: GREG & AMY WILSON

Address: 18 N. Holcomb

Phone Number/Fax Number: 248-625-0583

Date: 1/6/2004

Description of Original Structure:

Victorian Residence 2 story

Architectural Style of Original Structure: VICTORIAN/FARMHOUSE

Year Built: Approx. 1910

Original Materials

Foundation: Stone

Siding: Aluminum

Windows: wood w/ Aluminum Storms

Trim: Aluminum

Shingles: Asphalt

Porch: NONE

Other Important Characteristics: Bay window runs around to side

Description of Proposed Project: Add on wrap around porch in front of House that was an original

Reason for Proposed Project: restore House to original look

Architectural Style Chosen: Victorian

Project Materials:

Foundation: wood Siding: wood Windows: _____

Trim: wood Shingles: Asphalt Porch wood

Other Important Characteristics: 8" round columns, all white Extra Peak @ 45° Angle

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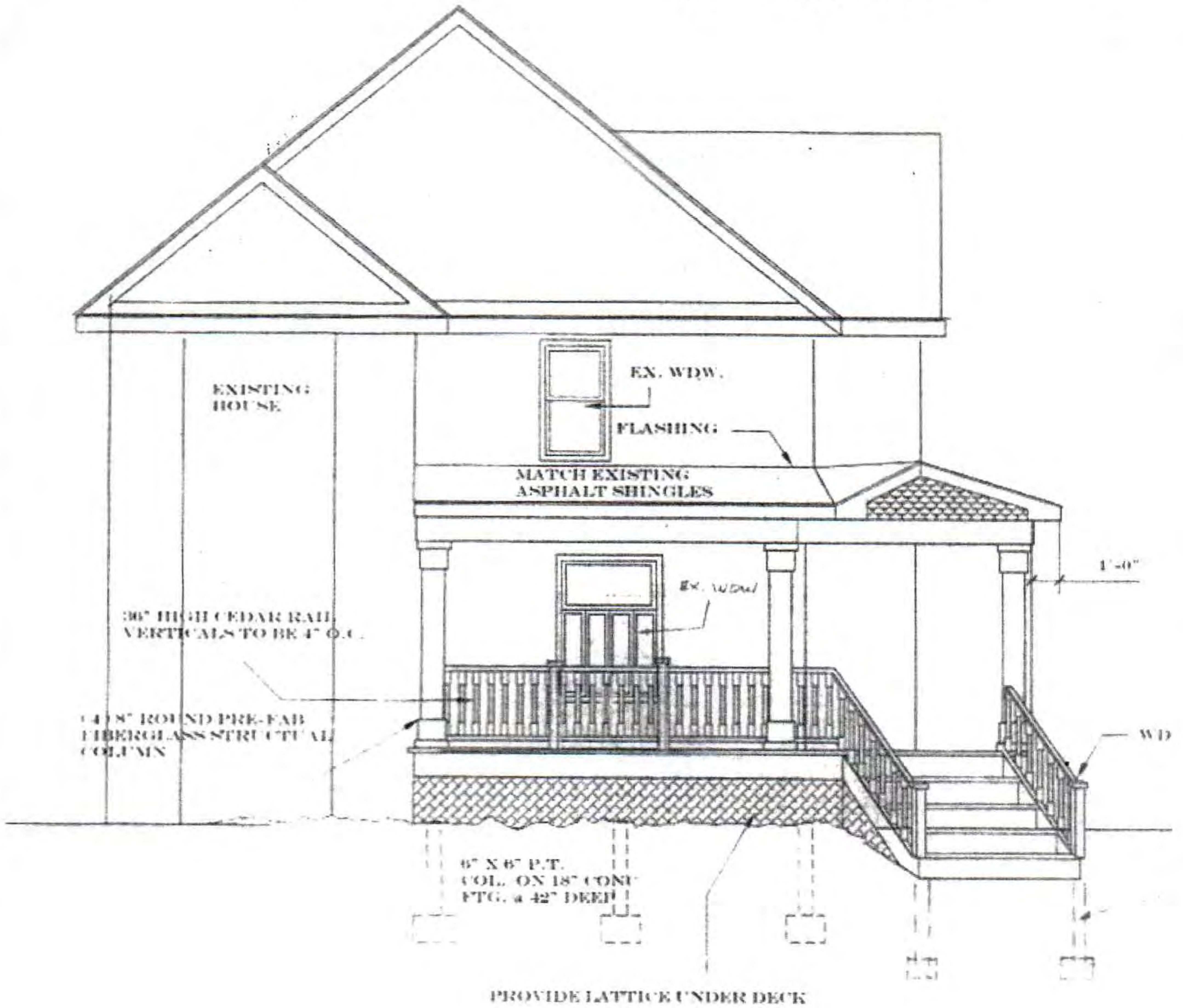
APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

AUTHORITY: P.A. 230 OF 1972, AS AMENDED COMPLETION: MANDATORY TO OBTAIN PERMIT PENALTY: PERMIT WILL NOT BE ISSUED

APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V AND VI
 NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED
 FOR PLUMBING, MECHANICAL, AND ELECTRICAL WORK PERMITS

I. PROJECT INFORMATION				
PROJECT NAME <i>wrap around Porch</i>		ADDRESS <i>18 N. Holcomb</i>		
CITY <i>Village of Clark</i>	VILLAGE <i>CLARKSTON</i>	TOWNSHIP <i>Independence</i>	COUNTY <i>CALHOUN</i>	ZIP CODE <i>48346</i>
BETWEEN <i>Miller & Washington</i>				
II. IDENTIFICATION				
A. OWNER OR LESSEE				
NAME <i>Greg & Amy Wilson</i>		ADDRESS <i>18 N. Holcomb</i>		
CITY <i>CLARKSTON</i>	STATE <i>MI</i>	ZIP CODE <i>48346</i>	TELEPHONE NUMBER <i>248 625-0583</i>	
B. ARCHITECT OR ENGINEER				
NAME <i>Dennis Perry & Associates</i>		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER <i>248 681 3641</i>	
LICENSE NUMBER			EXPIRATION DATE	
C. CONTRACTOR				
NAME <i>Home owner</i>		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
BUILDERS LICENSE NUMBER			EXPIRATION DATE	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION				
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION				
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION				
III. TYPE OF IMPROVEMENT AND PLAN REVIEW				
A. TYPE OF IMPROVEMENT				
1. <input type="checkbox"/> NEW BUILDING	3. <input checked="" type="checkbox"/> ALTERATION	5. <input type="checkbox"/> DEMOLITION	7. <input type="checkbox"/> FOUNDATION ONLY	9. <input type="checkbox"/> RELOCATION
2. <input checked="" type="checkbox"/> ADDITION	4. <input type="checkbox"/> REPAIR	6. <input type="checkbox"/> MOBILE HOME SET-UP	8. <input type="checkbox"/> PREMANUFACTURE	10. <input type="checkbox"/> SPECIAL INSPECTION
B. REVIEW(S) TO BE PERFORMED				
<input checked="" type="checkbox"/> BUILDING	<input checked="" type="checkbox"/> ELECTRICAL	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> FOUNDATION

Greg & Army Wilson
18 N. Holcomb



FRONT ELEVATION 1/4" = 1' - 0"

(248) 625-0583

