

CERTIFICATE OF APPROPRIATENESS PLACARD

for Raleigh Historic Resources

| 405 | POI | K | STR | FET |
|-----|-----|---|-----|-----|

Address

OAKWOOD

Historic District

Historic Property

001-14-MW

Certificate Number

1/7/2014

Date of Issue

7/7/2014

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 do not call for this final inspection, your Certificate of Appropriateness is null and void.

| Pro | ect | Des | cri | otic | n: |
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| R | eplace non-his | toric window | s on rear add | lition | |
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Signature,

Raleigh Historic Development Commission



Development Services Customer Service Center

One Exchange Plaza, Suite 400 Raleigh, North Carolina 27601 Phone 919-996-2495 Fax 919-516-2685

| Raleigh Historic Development Comm | nission – Certificate of Appropriateness (COA) Application | | | | | |
|--|---|--|--|--|--|--|
| RALEIGH HISTORIC DEVELOPMENT COMMISSION Minor Work (staff review) – 1 copy Major Work (COA Committee review) – 14 copy Most Major Work Applications Additions Greater than 25% of Building States and Demo of Contributing Historic Resource Post Approval Re-review of Conditions of Applications of Applications and Demo of Conditions and Demo of Cond | For Office Use Only Transaction # 382539 File # 0 - 14 - MW Fee 428 Amt Paid 428 Check # 2152 Rec'd Date 1213/13 Rec'd By 140444 | | | | | |
| If completing by hand, please use BLACK INK. [| Oo not use blue, red, any other color, or pencil as these do not photocopy. | | | | | |
| Property Street Address 405 POL | K STREET | | | | | |
| Historic District OAKWOOD | | | | | | |
| Historic Property/Landmark name (if applicable) | | | | | | |
| Owner's Name SARAH E. WINSLOW | , JAMES DAYID STRADLEY | | | | | |
| Lot size (width in feet) | 55 (depth in feet) 1021 | | | | | |
| For applications that require review by the COA Comm (across the street), and behind the property): | For applications that require review by the COA Committee (Major Work), list all properties within 100 feet (i.e. both sides, in front (across the street), and behind the property): | | | | | |
| Property Address | Property Address | | | | | |
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| I understand that all applications that require review by the | commission's Certificate of Appropriateness Committee must be submitted by | | | | | |

Page 1 of 3

application will not be accepted.

4:00 p.m. on the application deadline; otherwise, consideration will be delayed until the following committee meeting. An incomplete

| Type or print the f | ollowing: | | |
|---|---|--|--|
| Applicant SA | PAH E. WIL | ISLOW, JAMES | DAVID STRADLEY |
| Mailing Address | 405 PO | 18LOW, JAMES I | / |
| City OAL | 51/11 | State ICL | Zip Code 7 1/6/1 |
| Date 12/2/ | 2013 | Daytime Phone 919 424-9 | 1400 |
| Email Address S | arah wondowa | white and stradley com | 5400 Stradleya whiteand stradley. com |
| Signature of Appli | cant Sarah Eli | Junslow Med & | |
| | | | |
| | | Minor Work Approval (office use | only) |
| | | | ion becomes the Minor Work Certificate of |
| | | | ed placard form of the certificate as indicated at the |
| | | | contractor, tenant, or property owner from obtaining |
| B | | 5 (5 (5) (15) (15) | y staff will be forwarded to the Certificate of |
| Appropriateness Co | ommittee for review at the | next scheduled meeting. | |
| Signature $\int_{\mathcal{Q}\mathcal{M}}$ | or Yulls | <u></u> | Date |
| | | | 1 1 |
| | | | |
| | V | | |
| | | | |
| Project Categories | (check all that apply): | | |
| Exterior A | | | (Office Use Only) |
| Exterior A | Alteration | | |
| Exterior A Addition New Cons | Alteration | | (Office Use Only) Type of Work |
| Exterior A | Alteration | | |
| Exterior A Addition New Cons | Alteration struction n | ehabilitation tax credits for this project? | Type of Work |
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| ✓ Exterior A ☐ Addition ☐ New Cons ☐ Demolitio Will you be applyin ✓ Yes ☐ No | Alteration struction n ng for state or federal re | ehabilitation tax credits for this project? | Type of Work |
| ✓ Exterior A ☐ Addition ☐ New Cons ☐ Demolitio Will you be applyin ✓ Yes ☐ No | Alteration struction n ng for state or federal re | e sections of the design guidelines (www.r | Type of Work Chdc.org). Brief Description of Work |
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| | TO BE COMPLETED BY APPLICANT | | | | TO BE COMPLETED BY CITY STAFF | | |
|---------------------|---|-----|-----|-----|-------------------------------|-----|--|
| | | YES | N/A | YES | NO | N/A | |
| other g checklis | 8-1/2 " x 11" sheets with written descriptions and drawings, photographs, and raphic information necessary to completely describe the project. Use the st below to be sure your application is complete. Work (staff review) – 1 copy | | | | | | |
| Major V | Vork (COA Committee review) – <mark>14 copies</mark> | | | | | 1 | |
| 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.). | Ø | | / | | | |
| 2. | Description of materials (Provide samples, if appropriate). | V | | V | / | | |
| 3. | Photographs of existing conditions | V | | V | | | |
| 4. | Paint Schedule (if applicable) | | | | | | |
| 5. | Plot plan (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 proposed work | | | | | | |
| | □ Plan drawings □ Elevation drawings showing the new façade(s). **Interior ** Ulb.* □ Dimensions shown on drawings and/or graphic scale. □ 8-1/2" x 11" reductions of full-size drawings. If reduced size is so small as to be illegible, make 8-1/2" x 11" snap shots of individual drawings on the big sheet. | d | | | / | | |
| 7. | Fee (See Development Fee Schedule) | V | | | | | |

405 Polk St. Kitchen Renovation

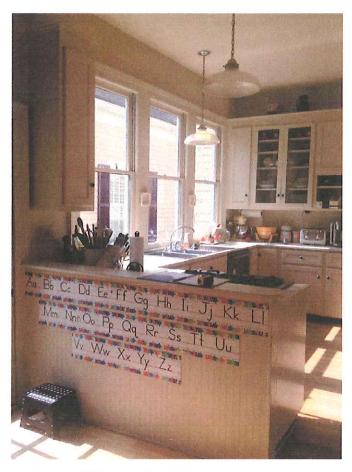
The only planned exterior alteration that will be made to the facade of 405 Polk Street will take place on the right side of the house. The change has to do with the three windows over the sink and countertop in the kitchen, which are not original to the house. See photos from a previous COA application attached. These three windows, added during a renovation to the house during the 1990s, will be replaced with 2 double hung Jeld-Wen Siteline EX windows. See attached chart for reference and dimensions. All trim for the new windows shall match existing trim work in size, profile, and material. New wood siding shall be laced in lightly with existing siding, to blend the alteration into the existing conditions. The siding around the current windows appears to have been replaced in 1990's as well and is not original to the house. Existing paint colors to remain.

Section dwg provided / confirmed by sbff.



405 Polk Street Front facade



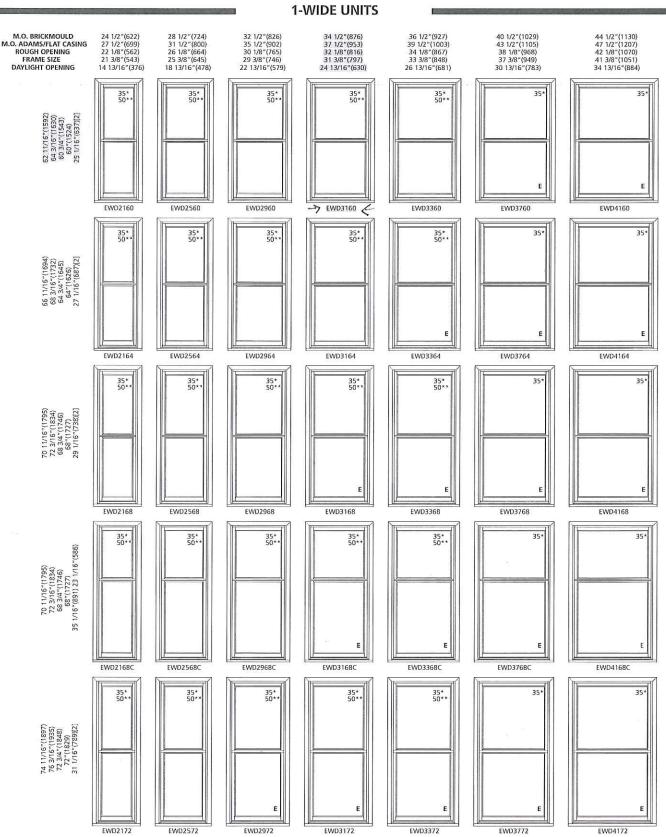


Exterior view and interior view of windows to be changed during kitchen renovation.



Siteline EX Primed Double-Hung Windows

Premium Wood



ELEVATION SYMBOL LEGEND:
M.O. = MASONRY OPENING
VALUES IN () ARE IN MILLIMETER CONVERSIONS

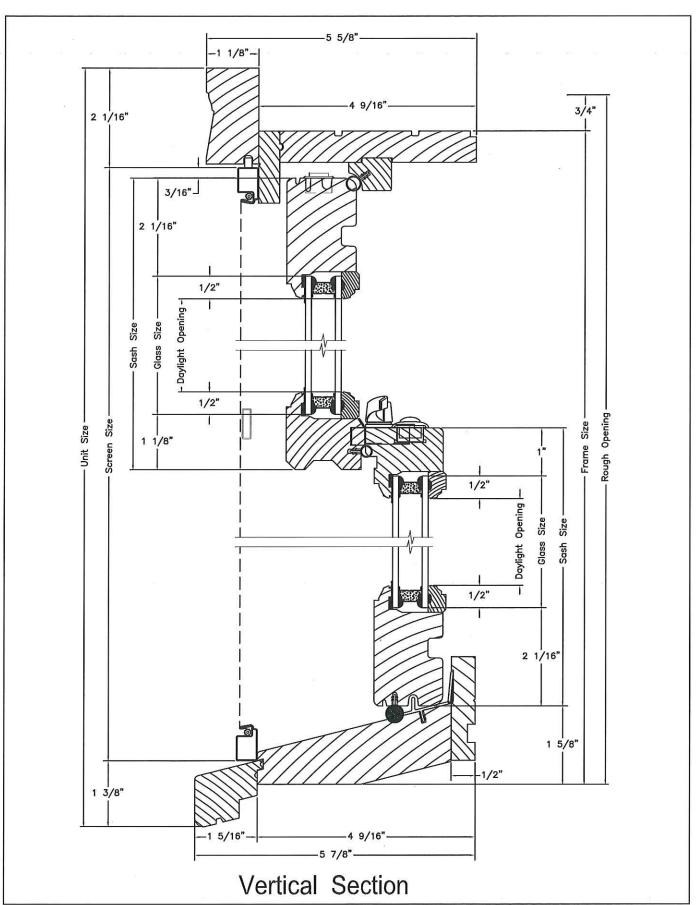
VALUES IN [] ARE NUMBER OF DAYLIGHT OPENINGS PER UNIT

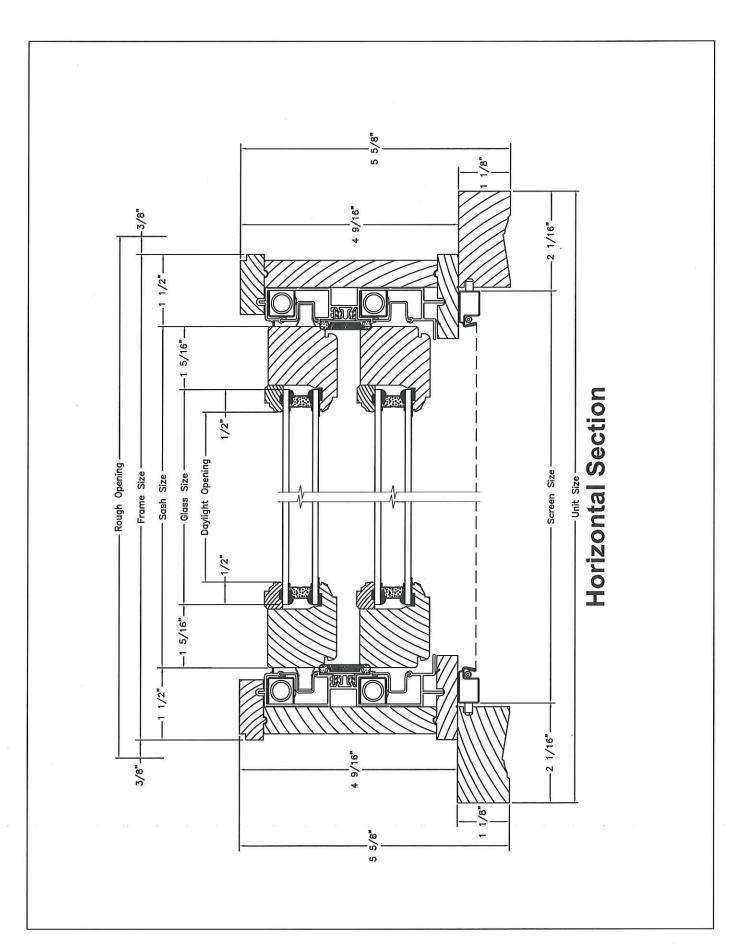
E UNIT MEETS EGRESS REQUIREMENTS FOR IRC CODE, STATE AND LOCAL CODES MAY DIFFER.
ALWAYS REFER TO LOCAL BUILDING CODES FOR COMPLETE REQUIREMENTS. CHECK WITH
LOCAL OFFICIALS TO ENSURE COMPLIANCE BEFORE INSTALLING THE UNIT.

##* INDICATES DESIGN PRESSURE (DP) RATING WITH STANDARD GLAZING ##** INDICATES OPTIONAL DESIGN PRESSURE (DP) RATING

Note: Elevations shown DO NOT have exterior trim. Subtract 1/2" (12.7) from M.O. (Masonry Opening) for Unit Sizes. Masonry Openings above include Sill Nose, see Trim Options page for Sill Nose specifications. For other Trim Options refer to the Unit Sizing, Rough Opening & Masonry Openings page.

SCALE 1/4" = 1'





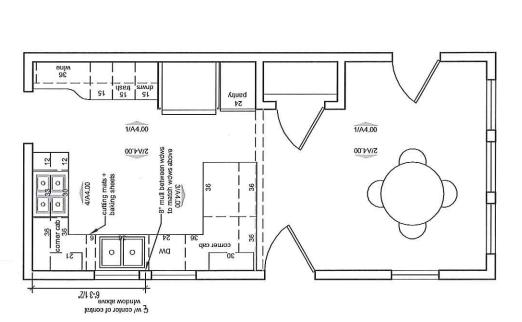
12/10/13

PELL ST studio Architect Ashley Henkel Morris 306 Pell Street Raleigh, NC 27604 919,696.0970



0 0 € same as wdws above

Existing Kitchen Plan Scale - 3/16" = 1'-0"



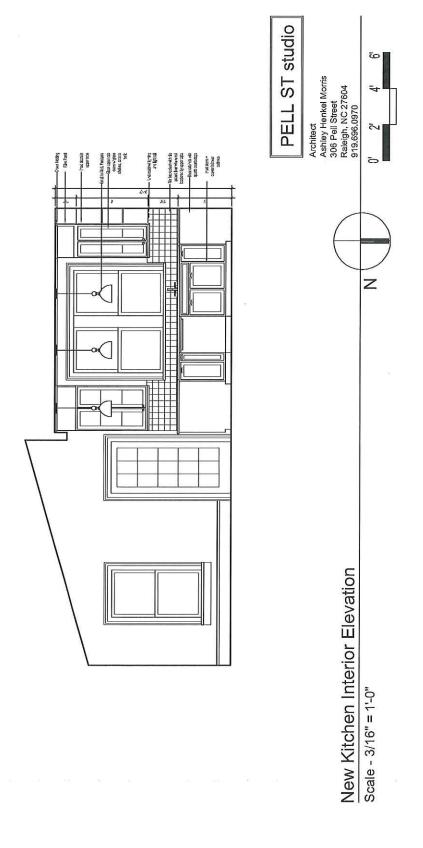
PELL ST studio

Architect Ashley Henkel Morris 306 Pell Straet Raleigh, NC 27604 919.696.0970



Z

New Kitchen Plan Scale - 3/16" = 1'-0"



12/10/13

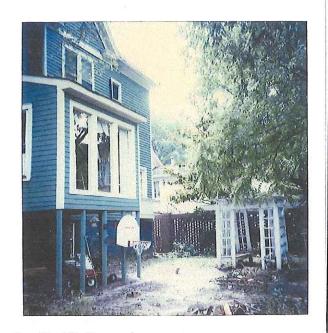




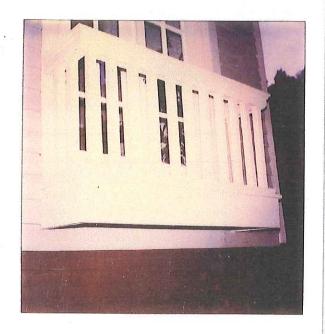
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