



Department of Planning and Community Development
Kalamazoo Historic District Commission

Development Center – 415 Stockbridge
Kalamazoo, Michigan 49001
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ROOF

APPLICATION FOR PROJECT REVIEW

(PLEASE PRINT CLEARLY - See instructions on reverse side)

Property Address: _____
Applicant: _____
Mailing Add. _____
City State & Zip: _____
Phone: _____
Fax: _____
Email _____

Historic District: _____
Owner: _____
Mailing add _____
City, State Zip _____
Phone: _____
Fax: _____
Email _____

Proposed Work: Roof color _____ Manufacturer _____

Use additional _____
sheets to describe work _____
if necessary _____

ALL NEW ROOFS MUST USE A DARK DRIP EDGE, RETAIN ALL CROWN MOULDING AND TRIM, USE FLASHING TO BLEND WITH THE ROOF, TUCKED BEHIND CLAPBOARDS AND INTO MORTAR JOINTS.

_____ This property has at least one working smoke detector for each dwelling unit. (Required) * see back
(Owner or applicant's initials)

Applicant's Signature: _____ Date: ____/____/____
Owner's Signature: _____ Date: ____/____/____
(if different)

-For Historic Preservation Coordinator's Use Only-

Case Number: _____ Date Received: ____/____/____

REFERRED TO:

COMMISSION

Meeting Date: ____/____/____

COMMENTS: _____

ADMINISTRATIVE

Staff Review Date: ____/____/____

COMMENTS _____

Approval in Concept Date: ____/____/____

Letter mailed ____/____/____

COA issued ____/____/____

FINAL ACTION

Approve Site Visit Approve w/Conditions Deny Postpone Withdrawn

ACTION DATE ____/____/____

Certificate of Appropriateness Issued ____/____/____

Notice of Denial with appeals information ____/____/____

Notice to Proceed ____/____/____ Comments _____

Historic Preservation Coordinator

Date

ROOF

Historic District Commission - Application for Project Review

Filling out the application – instructions and tips.

(The HDC meets on the 3rd Tuesday of each month, application deadline is the 2nd Tuesday)

Property address: street address of the property where the work will be done

Applicant: Owner or the owner's contractor.

Mailing Address: Applicant's address

City, State & Zip:

Phone: Specify home or work

FAX:

Email

Historic district: Stuart, South Street- Vine Area, Haymarket, West Main Hill or Rose Place

Owner: Legal owner of property

Mailing Address: Owner's address

City, State & Zip:

Phone: Specify home or work

FAX:

Email

Proposed Work: Roof

1. Dark "D" type drip edge.
2. Ridge vent colored to blend with roof.
3. Single cut or open valleys (no woven shingle valleys).
4. New deck is to be installed to protect/accommodate crown moulding by installing decking to hang over 3/4" - 1" past existing or future crown moulding. *IMPORTANT NOTE: In areas where crown moulding is missing, new deck installation shall allow for future re-installation of crown moulding.*
5. Flashing shall be a color to complement the roof color (Not bright metal) and properly installed:
 - a. Flashing must be tucked behind clapboards or siding on porches, dormers and side roofs.
 - b. Flashing must be tucked into mortar joints of chimneys.
6. Any unpainted wood must be painted within six months from the date of completion.

(Remember: Always apply for and obtain your "Certificate of Appropriateness" BEFORE you purchase materials for your project. You will also need a building permit.)

If you need to change the roofline – for example putting a slope on a flat roofed rear addition – include drawings and measurements documenting the proposed new configuration. For more complex work, please include as many **continuation or illustration sheets** as you need to present a clear picture to the commission of your proposed work. **Measurements are very important.** Drawings should be black or dark blue ink on white paper (no larger than 11x17) because your application and drawings will be photocopied for each commissioner to review. You need submit only one set of drawings; city staff will make the necessary copies. If you want to submit color copies to illustrate your work, please submit 8 sets (one for each commissioner and one for the coordinator's files.)

* [] This property has at least one working smoke detector for each dwelling unit. Please initial to verify at least one working smoke detector in each dwelling unit. This is REQUIRED by state law or the application will be considered incomplete.

PHOTOS: The historic preservation coordinator is responsible for taking photographs of the proposed work and the structure – sometimes on the day the coordinator meets with the applicant, but often in the days immediately before the meeting when the property is to be reviewed. If you wish to take additional photos, one set is usually adequate for the commissioners to examine. *(Hint: Photos are much easier to pass around in a photo album page.)*

Emergency repairs: If damage occurs to a structure in a historic district, which requires emergency repairs, steps may be taken to secure the structure without the approval of the commission or the coordinator. Cover damaged windows or holes in a roof with tarps or wood to prevent further damage. Support dangling or loose elements or remove and store them. Notify the Coordinator of the damage to the structure on the first weekday available after the damage occurs and the coordinator will visit the structure as well as arranging a site visit by commission members to approve repairs if necessary. **THIS WILL BE DONE AS QUICKLY AS POSSIBLE IN ORDER TO FACILITATE REPAIRS OF THE STRUCTURE IN A TIMELY MANNER.**

If you have questions about completing this application for project review, please call the Historic Preservation Coordinator at 337-8804 or by email at ferraros@kalamazoo.org