

## **Historic Preservation Services**

Community Development & Neighborhood Services 281 North College Avenue P.O. Box 580 Fort Collins, CO 80522.0580

970.416.4250 preservation@fcgov.com fcgov.com/historicpreservation

## REPORT OF ALTERATIONS TO DESIGNATED RESOURCE

Site Number/Address: 505 E. Laurel St. Laurel School National Register Historic District ISSUED: February 1, 2023

Helen E. Williams/Trustee c/o Gregg Knapp, Complete Basement Systems 11795 E. 45<sup>th</sup> Ave. Denver, CO 80239

Dear Property Owner:

This report is to inform you of the results of this office's review of proposed alterations to 505 E. Laurel St., pursuant to Fort Collins Municipal Code, Chapter 14, <u>Article IV</u>. A copy of this report may be forwarded to the Colorado Office of Archaeology and Historic Preservation as well.

The alterations reviewed include:

• Installation of 28 helical piers to stabilize foundation

Our staff review of the proposed work finds the alterations meet the SOI Standards for Rehabilitation and the project appears to be routine in nature with minimal effects to the historic resource, meeting the requirements of Article IV cited above.

Notice of the approved application has been provided to building and zoning staff to facilitate the processing of any permits that are needed for the work. Please note that work beyond that indicated in your permit application/correspondence requires additional approval.

If you have any questions regarding this report, or if I may be of any assistance, please do not hesitate to contact me. I can be reached at yjones@fcgov.com or at 970-224-6045.

Sincerely,

Yani Jones Historic Preservation Planner



## **COMMUNITY DEVELOPMENT & NEIGHBORHOOD SERVICES**

281 N. College Ave. • Fort Collins, CO 80524 • Phone: 970.416.2740 • www.fcgov.com/building

## **BUILDING PERMIT APPLICATION**

| APPLICATION NUMBER:   | APPLICATION DATE:   |                  |                      |           |             |                   |      |
|---|---------------------|------------------|----------------------|-----------|-------------|-------------------|------|
| Job Site Address 505 East Laurel Street, PROPERTY OWNER INFO: (All owner information  |                     |                  |                      | U         | nit#        |                   |      |
|   | -                   | •                | •                    | iddla     |             |                   |      |
| Last Name Williams First  |                     |                  |                      |           |             | 7: <sub>0</sub> 0 | 0526 |
| Street Address 3500 Patterson Court   |                     |                  |                      | State     |             | <u> ه</u>         | 0526 |
| Phone # (970) 310-9183 Ema  |                     |                  |                      |           |             |                   |      |
| Name of Business (COMMERCIAL USE ONLY)  |                     |                  |                      |           |             |                   |      |
| <b>CONTRACTOR INFO:</b> Company Name <b>Groun</b>   | dworks (            | Colorado DBA     |                      |           |             |                   |      |
| License Holder Name   |                     |                  | LIC #                | N/A       | CER         | T#_               |      |
| <u>LEGAL INFO:</u>  |                     |                  |                      |           |             |                   |      |
| Subdivision/PUDI  | Filing#             | Lot #            | Block #              | L         | ot Sq Ft    |                   |      |
| <b>CONSTRUCTON INFO:</b> Total Building Sq Ft (NOT  | including b         | asement)         | Total Ga             | arage So  | ղ. Ft       |                   |      |
| Residential Sq FtCommercial Sq Ft   | # (                 | of Stories       | Bldg Ht              | # of Dw   | elling U    | nits_             |      |
| 1st Floor Sq Ft2nd Floor Sq Ft  | 3rd Flo             | oor Sq Ft        | Unfinished I         | Baseme    | nt Sq Ft    |                   |      |
| Finished Basement Sq Ft # of E  | Bedrooms            |                  | # of Full Baths      | 5         |             |                   |      |
| ¾ Baths ½ Baths   | # Fire              | eplaces          |                      |           |             |                   |      |
| ENERGY INFORMATION: (CHECK ONE)   |                     |                  |                      |           |             |                   |      |
| ComCheck ☐ UA (ResCheck) ☐ SPA (Simulate Alternation)  Air Conditioning? YES ☐ NO ☐   | ed Performa<br>ive) | <sup>nnce</sup>  | escriptive 🗌         | ERI(En    | ergy Ratir  | ng Inde           | x) 🗆 |
| City of Fort Collins Approved Stock Plan # <b>SPO</b>   |                     | List Option      | #s                   |           |             |                   |      |
| UTILITIES INFO: Gas ☐ Electric Electric Main Breaker Size (Residential Only):  ZONING INFO: (COMMERCIAL USE ONLY)  Proposed Use: (i.e. medical, office, bank, retail, etc.) | 150 am              | ·                | estal Yes<br>200 Amp |           | No<br>Other |                   |      |
| For Commercial remodels and tenant finishes,  | · —                 | swer the follow  | wing questions:      |           |             |                   |      |
| Is the remodel/tenant finishes for an existing or   |                     |                  |                      |           |             |                   |      |
| Existing Tenant☐ New Tenant☐  If for a new tenant, is this the first tenant to occ  Yes ☐ No ☐ If not for the initial te  | cupy this s         |                  | as the previous u    | ise of th | is tenan    | t spac            | e?   |
| Are there any exterior building changes (including season) leave describe:  | ng mecha            | nical) associate | d with the work      | ? Y       | es 🗆        | No                |      |

| Value of Construction (      | materials and labor):     | \$ <u> </u>  | <u>55,473                                    </u> |                       |               |                               |
|------------------------------|---------------------------|--------------|---|-----------------------|---------------|-------------------------------|
| Description of Work:         | Stabilize the fo          | undatio      | on by in  | stalling (28) h       | elical pi     | ers around the                |
|                              | foundation wal            | I perim      | eter to h   | nelp mitigate v       | /ertical r    | novement.                     |
|                              |                           |              |   |                       |               |                               |
|                              |                           |              |   |                       |               |                               |
|                              |                           |              |   |                       |               |                               |
| JOBSITE SUPERVISOR C         | ONTACT INFO: Name         | Greg         | Knapp   |                       | Phone         | 720-507-2711                  |
| SUBCONTRACTOR INFO           | <u>):</u> Electrical      |              |   | Mechanica             | Ι             |                               |
| Plumbing                     | Fran                      | ning         |   | <br>R                 | oofing        |                               |
| Fireplace                    | Sol                       | lar          |   |                       | Other         |                               |
|                              |                           |              |   |                       |               | operty owners, applying for a |
| remodel permit, shall indicc | ate their awareness about | their prope  | erty having b                                     | een inspected for Asb | estos Contaii | ning Materials (ACM's).       |
| ☐ I do not know i            | f an asbestos inspection  | on has bee   | en conduct  | ed on this property   | <i>/</i> .    |                               |
| ☐ An asbestos ins            | spection has been con     | ducted on    | this prope  | rty on or about (er   | nter date)    |                               |
| ☐ An asbestos ins            | spection has not been     | conducted    | d on this pi                                      | operty.               |               |                               |
| Applicant: I hereby ackno    | owledge that I have rea   | d this app   | lication and                                      | state that the abo    | ve informa    | tion is correct and agree to  |
| comply with all requirem     | ents contained herein a   | nd City of F | Fort Collins                                      | ordinances and state  | e laws regul  | ating building construction.  |
| Applicant Signature 🗡        | Legknary                  | 1/31/20      | )23 1   | ype or Print Name     | Greg          | Knapp                         |
| Phone # <u>720-507-2</u>     | ?711                      | Email        | cbs.perr  | nits@completeb        | asement       | systems.net                   |
|                              |                           |              |   |                       |               |                               |

THIS APPLICATION EXPIRES 180 DAYS FROM APPLICATION DATE



