

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

CERTIFICATE OF APPROPRIATENESS ISSUED: May 5, 2023 EXPIRATION: May 5, 2024

Michael Ring c/o Adam Trainor, 970 Services 504 W. Eisenhower Blvd., Suite 1 Loveland, CO 80537

Dear Property Owner:

This letter provides you with confirmation that the proposed changes to your designated Fort Collins landmark property, the [name of property] at [address] have been approved by the City's Historic Preservation Division because the proposed work meets the criteria and standards in Chapter 14, <u>Article IV</u> of the Fort Collins Municipal Code.

1) Re-roofing house and 2 garages – Wood shingles to asphalt shingles

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 all ensuing work must conform to the approved plans. Any non-conforming alterations are subject to stop-work orders, denial of Certificate of Occupancy, and restoration requirements and penalties.

If the approved work is not completed prior to the expiration date noted above, you may apply for an extension by contacting staff at least 30 days prior to expiration. Extensions may be granted for up to 12 additional months, based on a satisfactory staff review of the extension request.

Property owners can appeal staff design review decisions by filing a written notice of appeal to the Director of Community Development & Neighborhood Services within fourteen (14) days of this decision. If you have any questions regarding this approval, 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 970-658-0263.

Sincerely,

Yani Jones Historic Preservation Planner

Applicable Code Standard	Summary of Code Requirement and Analysis (Rehabilitation)	Standard Met (Y/N)
SOI #1	A property will be used as it was historically or be given a new use that requires minimal change to its distinctive materials, features, spaces, and spatial relationships;	Y
	This project does not impact the residential use of this property.	
SOI #2	The historic character of a property will be retained and preserved. The removal of distinctive materials or alteration of features, spaces, and spatial relationships that characterize a property will be avoided.	Y
	Because the wood material of the shingle roof is not a character- defining feature of this house or the garages, distinctive materials are not being removed.	
SOI #3	Each property will be recognized as a physical record of its time, place, and use. Changes that create a false sense of historical development, such as adding conjectural features or elements from other historic properties, will not be undertaken.	N/A
SOI #4	Changes to a property that have acquired historic significance in their own right will be retained and preserved.	N/A
SOI #5	Distinctive materials, features, finishes, and construction techniques or examples of craftsmanship that characterize a property will be preserved.	Y
	Because the wood material of the shingle roof is not a character- defining feature of this house or the garages, distinctive materials are not being removed.	
SOI #6	Deteriorated historic features will be repaired rather than replaced. Where the severity of deterioration requires replacement of a distinctive feature, the new feature will match the old in design, color, texture, and, where possible, materials. Replacement of missing features will be substantiated by documentary and physical evidence.	Y
	Because the wood material of the shingle roof is not a character- defining feature of this house or the garages, replacement with a shingle product of another material type is an acceptable approach.	
SOI #7	Chemical or physical treatments, if appropriate, will be undertaken using the gentlest means possible. Treatments that cause damage to historic materials will not be used.	N/A

SOI #8	Archeological resources will be protected and preserved in place. If such resources must be disturbed, mitigation measures will be undertaken.	N/A
SOI #9	New additions, exterior alterations, or related new construction shall not destroy historic materials that characterize the property. The new work shall be differentiated from the old and shall be compatible with the massing, size, scale, and architectural features to protect the historic integrity of the property and its environment.	N/A
SOI #10	New additions and adjacent or related new construction will be undertaken in such a manner that, if removed in the future, the essential form and integrity of the historic property and its environment would be unimpaired.	N/A



ROOFING PERMIT APPLICATION

Date	
Application #	

Date 4/28/2023

281 N College Ave. Fort Collins, CO 80524

Print Name Adam Trainor

970-416-2740

huildingservices@fcgov.com

Full Cullins, CO 6052	4 buildingservices@icgov.com		
	ALL information is REQUIRED. Incomplete applications w		
Job Site Address 14	00 W Oak Street	City/State/Zip For	t Collins, CO 80521
Property Owner Information Name Michael Ring Phone Number			
Address 1400 W	Oak Street	City/State/Zip For	t Collins, CO 80521
RESIDENTIAL	○ Single Family Detached ○ Townhome (attached) ○ Duplex	Apartment/Condo	Garage/Other
COMMERCIAL	Bank Bar Church Hotel/Motel Medical Office	Office Re	etail Restaurant
COMMERCIAL STR	UCTURES		
Are you tearing off e	xisting roofing materials to the decking? O Yes O No		
If keeping existing la	yers, how many layers are there? What kind of material a	are they?	
What new roofing m	aterials are you using?		
Is there existing insu	ulation? Yes No Will any insulation be removed/re	placed? O Yes	No
Materials Manufacturer Owe	ens Corning Duration Flex an 2:12 pitch) Yes No \$ 11,400.00 # of Squares 38	# of Sto	ries <u>1</u>
ASPHALT ROOF RE	Roof Repair 49% of roof area max. Class 4 shingle is Roof Repair 50% or more of roof area. Class 4 shingle	•	Note location(s) of areas to be repaired in space provided below.
Additional Information (if applicable)	Reroof down to decking and install 7/16 osb and class 4 dwelling	impact resistant s	shingle. House
Contractor Informat			
Address 102 S Sa	aint Louis Ave	City/State/Zip Lov	veland, CO 80537
Phone Number 970	0-888-0970 _{Email} corinne@970s		
License R-2490	Certificate 3686-R		
WORK PERFORME		Exempt Roofer (1099 Company Name: 97	
with all requirements	ge that I have read this application and state that the above informatios contained herein and city ordinances and state laws regulating building paid and issued.		
			The state of the s

Signature



ROOFING PERMIT APPLICATION

Date	
Application #	

Date 4/28/2023

281 N College Ave. Fort Collins, CO 80524

Print Name Adam Trainor

970-416-2740

huildingservices@fcgov.com

Full Cullins, CO 6052	4 buildingservices@icgov.com		
	ALL information is REQUIRED. Incomplete applications w		
Job Site Address 14	00 W Oak Street	City/State/Zip For	t Collins, CO 80521
Property Owner Information Name Michael Ring Phone Number			
Address 1400 W	Oak Street	City/State/Zip For	t Collins, CO 80521
RESIDENTIAL	○ Single Family Detached ○ Townhome (attached) ○ Duplex	Apartment/Condo	Garage/Other
COMMERCIAL	Bank Bar Church Hotel/Motel Medical Office	Office Re	etail Restaurant
COMMERCIAL STR	UCTURES		
Are you tearing off e	xisting roofing materials to the decking? O Yes O No		
If keeping existing la	yers, how many layers are there? What kind of material a	are they?	
What new roofing m	aterials are you using?		
Is there existing insu	ulation? Yes No Will any insulation be removed/re	placed? O Yes	No
Materials Manufacturer Owe	ens Corning Duration Flex an 2:12 pitch) Yes No \$ 11,400.00 # of Squares 38	# of Sto	ries <u>1</u>
ASPHALT ROOF RE	Roof Repair 49% of roof area max. Class 4 shingle is Roof Repair 50% or more of roof area. Class 4 shingle	•	Note location(s) of areas to be repaired in space provided below.
Additional Information (if applicable)	Reroof down to decking and install 7/16 osb and class 4 dwelling	impact resistant s	shingle. House
Contractor Informat			
Address 102 S Sa	aint Louis Ave	City/State/Zip Lov	veland, CO 80537
Phone Number 970	0-888-0970 _{Email} corinne@970s		
License R-2490	Certificate 3686-R		
WORK PERFORME		Exempt Roofer (1099 Company Name: 97	
with all requirements	ge that I have read this application and state that the above informatios contained herein and city ordinances and state laws regulating building paid and issued.		
			The state of the s

Signature



ROOFING PERMIT APPLICATION

Date	
Application #	

_{Date} 4/28/2023

281 N College Ave. Fort Collins. CO 80524

Print Name Adam Trainor

970-416-2740

huildingservices@fcgov.com

ort Comms, CO 6032	ALL information is DECURED Incomplete applications of	ill not be accepted
	ALL information is REQUIRED. Incomplete applications w	
Job Site Address 14	00 W Oak Street	City/State/Zip Fort Collins, CO 80521
Property Owner Information Name Michael Ring Phone Number		703-346-4927
Address 1400 W (Oak Street	City/State/Zip Fort Collins, CO 80521
RESIDENTIAL	○ Single Family Detached ○ Townhome (attached) ○ Duplex	Apartment/Condo Garage/Other
COMMERCIAL	Bank Bar Church Hotel/Motel Medical Office	Office Retail Restaurant
COMMERCIAL STR	UCTURES	
Are you tearing off e	existing roofing materials to the decking? O Yes O No	
If keeping existing la	ayers, how many layers are there? What kind of material	are they?
What new roofing m	aterials are you using?	
Is there existing insu	ulation? Yes No Will any insulation be removed/re	eplaced? O Yes O No
Value of Constr Residential and C	ruction ommercial = Labor and Materials \$ \$ 11,400.00)
	ens Corning Duration Flex # of Squares 38	# of Stories 1
ASPHALT ROOF RE	Roof Repair 49% of roof area max. Class 4 shingle is Roof Repair 50% or more of roof area. Class 4 shingle	to be repaired in space
Additional Information	Reroof down to decking and install 7/16 osb and class 4	impact resistant shingle. House
(if applicable)	dwelling	
Contractor Informat Name 970 Services		
Address 102 S Sa	nint Louis Ave	City/State/Zip Loveland, CO 80537
Phone Number 970	0-888-0970 _{Email} corinne@970s	
License R-2490	Certificate 3686-R	
	○ License/Certificate Holder ○ Payroll Employees ○	Exempt Roofer (1099): EX
WORK PERFORME		Company Name: 970 Services
with all requirements	ge that I have read this application and state that the above informations contained herein and city ordinances and state laws regulating build been paid and issued.	

Signature



