



Historic Preservation Services
Community Development & Neighborhood Services
281 North College Avenue
P.O. Box 580
Fort Collins, CO 80522.0580
970.224.6078
preservation@fcgov.com
fcgov.com/historicpreservation

CERTIFICATE OF APPROPRIATENESS – Minor Alteration

ISSUED: August 23, 2023

EXPIRATION: August 23, 2024

David Costlow
c/o Bernardo Caceres (Berna Roofing)
2927 Bassick St.
Fort Collins, CO 80526

Dear Property Owner:

This letter provides you with certification that proposed work to your designated Fort Collins landmark property, the Garbutt Residence and Garage at 121 S. Whitcomb St., has been approved by the City's Historic Preservation Division (HPD) because the proposed work appears to be routine in nature with minimal effects to the historic resource, and meets the requirements of Chapter 14, [Article IV](#) of the Fort Collins Municipal Code.

The alterations reviewed include:

- Re-roofing – TPO on flat-roofed garage

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. Items requiring further approval include, but are not limited to, the following activities:

- Work affecting, or repair of, a chimney;
- Repair or replacement of historic decorative or functional features on or near the roof, such as fascia, purlins, brackets, eaves, gutters, and dormers;
- Installation of roof insulation above the sheathing that will result in more than a 4-inch increase in the roof height; (note: uncovered portions at the eave should be covered with plain fascia or drip edge);
- Addition of new rooftop features including skylights, dormers, and large new vents (note: no further review is needed to install standard edge, ridge, or "turtle" vents required for meeting ventilation standards on new roofs).

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.

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) 224-6045.

Sincerely,

Yani Jones, Historic Preservation Planner



ROOFING PERMIT APPLICATION

Date _____

Application # _____

281 N College Ave. 970-416-2740
 Fort Collins, CO 80524 buildingservices@fcgov.com

ALL information is REQUIRED. Incomplete applications will not be accepted.

Job Site Address 121 S Whitcomb St City/State/Zip _____

Property Owner Information

Name Dave Phone Number 970-218-9239

Address 121 S. Whitcomb St City/State/Zip FTC 80521

RESIDENTIAL	<input type="radio"/> Single Family Detached	<input type="radio"/> Townhome (attached)	<input type="radio"/> Duplex	<input type="radio"/> Apartment/Condo	<input checked="" type="radio"/> Garage/Other			
COMMERCIAL	<input type="radio"/> Bank	<input type="radio"/> Bar	<input type="radio"/> Church	<input type="radio"/> Hotel/Motel	<input type="radio"/> Medical Office	<input type="radio"/> Office	<input type="radio"/> Retail	<input type="radio"/> Restaurant

COMMERCIAL STRUCTURES

Are you tearing off existing roofing materials to the decking? Yes No

If keeping existing layers, how many layers are there? _____ What kind of material are they? Roll Roofing Modified

What new roofing materials are you using? TPO 60 ML

Is there existing insulation? Yes No Will any insulation be removed/replaced? Yes No

Value of Construction	Residential and Commercial = Labor and Materials \$ <u>\$ 5,600.00</u>
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Materials Manufacturer GAR # of Squares 4.5 # of Stories 4

FLAT ROOF (less than 2:12 pitch) Yes No

ASPHALT ROOF REPAIRS ONLY	<input type="radio"/> Roof Repair 49% of roof area max. Class 4 shingle is not required. <input checked="" type="radio"/> Roof Repair 50% or more of roof area. Class 4 shingle is required.	Note location(s) of areas to be repaired in space provided below.
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Additional Information (if applicable) Re-roof

Contractor Information

Name Berna Roofing
 Address 719 Blue Teal Dr City/State/Zip FTC 80524
 Phone Number 970-412-2022 Email Bernarroofing99@gmail.com
 License R-17-19 Certificate _____

WORK PERFORMED BY	<input checked="" type="radio"/> License/Certificate Holder <input type="radio"/> Payroll Employees <input type="radio"/> Exempt Roofer (1099): EX-_____ <input type="radio"/> Homeowner	Company Name: <u>Berna Roofing</u>
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I hereby acknowledge that I have read this application and state that the above information is complete and correct. I agree to comply with all requirements contained herein and city ordinances and state laws regulating building construction. I know that a permit is not valid until it has been paid and issued.

Print Name Bernardo Caseres Signature Date 08/23/22



BUILDING PERMIT APPLICATION:

Solar

All information on the application must be filled out (as applicable).

USE / TYPE OF BUILDING (check the correct uses below):

- Residential Commercial
- Single family detached Duplex/Two-Family Single Family Attached (Townhome) Multi-Family (Apartment/Condo)
- Garage Bank Bar Church Hotel/Motel Medical Office Retail Other : _____

JOB SITE ADDRESS: 121 S. Whitcomb st **UNIT#:** _____

PROPERTY OWNER INFO: (All owner information is required – NOT optional)

Last Name Pasquone First Name Dave Middle _____
 Street Address 121 S Whitcomb St City Fort Collins State CO Zip 80521
 Phone # 970-218-9230 Email _____

CONTRACTOR INFO:

Company Name Berna Roofing
 License Holder Name Bernardo Caceres LIC # R1719 CERT # _____

CONSTRUCTION INFO (check any that apply):

- PV (photovoltaic) Thermal Hydronic System
- Mounting: Ground Roof

UTILITIES INFO:

- Electric Service Upgrade? Yes No Existing Amps _____ New Amps _____
- Electric Meter Relocation? Yes No
- Meter change out? Yes No
- Panel change out? Yes No

VALUE OF CONSTRUCTION (materials and labor): \$ ~~Tear-off All Existing Modified Materi~~ \$5,600.00

DESCRIPTION OF WORK (Include KWh and number of solar panels):

Tear-off All Existing Modified Asphalt and Install New TPO GOML

JOBSITE SUPERVISOR CONTACT INFO: Name Bernardo Caceres Phone 970-412-2022

SUBCONTRACTOR INFO:

Electrical _____ Plumbing _____

Applicant: I hereby acknowledge that I have read this application and state that the above information is correct and agree to comply with all requirements contained herein and City of Fort Collins ordinances and state laws regulating building construction.

Applicant Signature Bernardo Caceres Type or Print Name Bernardo Caceres
 Phone # 970-412-2022 Email Bernarroofing.99@gmail.com

THIS APPLICATION EXPIRES 180 DAYS FROM APPLICATION DATE