

## **Historic Preservation Services**

Community Development & Neighborhood Services 281 N. College Ave. Fort Collins, CO 80524

970.224.6078 preservation@fcgov.com fcgov.com/historicpreservation

## CERTIFICATE OF APPROPRIATENESS – Minor Alteration ISSUED: October 9, 2025 EXPIRATION: October 9, 2026

Troy Brian Soukup c/o Joel White, Glass Doctor of the Front Range 2901 S. College Ave. Fort Collins, CO 80525

## Dear Property Owner:

This letter provides you with certification that proposed work to your designated Fort Collins landmark property at 7 Old Town Square 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, <u>Article IV</u> of the Fort Collins Municipal Code.

The alterations reviewed include:

• Replacement in-kind of 2 non-historic swinging glass doors with black metal frame (see photos of existing and new)

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 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 <u>yjones@fcgov.com</u> or at (970) 224-6045.

Sincerely,

Yani Jones Historic Preservation Planner



970-223-9963

Phone #

		• 1 <u></u>		all agency of Constitutions	A CONTRACTOR OF THE CONTRACTOR
BUILDING	S PERMI	T APPLICATION:	F	enestration (	exterior doors & windows)
Check all the appl	v: All info	rmation on the application	must be fi	led out (as app	licable).
Residential		Commercial			
Single family d			e Family Attac	hed (Townhome)	☐ Multi-Family (Apartment/Condo
_			I/Motel 🔲	Medical Office	
Garage 🗌				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	UNIT#:
JOB SITE AD	DRESS: / C	Old Town Square, Fort Collins	00 00021	4	Oldi I W.
PROPERTY O	WNER INFO	D: (All owner information is	required - N	IOT optional)	
		Town Square C			Middle_Brian
Street Addre	ss // 0/4	( Town Square "	ty_F121	Collins	State Co Zip 805
Phone #	70.221	· 9332 Email_+	roy æ	(d town sq	,.Com
CONTRACTO			V	.5.	
Company Na	me Glass	Doctor of the Front Rang	ge		and the second s
License Hold	er Name			-	_LIC #CERT #
CONSTRUCT	ON INFO:				
1. Like for l	ike fenestra	tion replacements (non-stru	ctural):		
:	Quantity	Is the fenestration :	U- factor	SHGC factor	Is % glazing transparency the sa
	replaced	operable?			(commercial only)
		(commercial and more than 3			Ground floor = 60% glazing (transparency) Upper floors = 40% glazing (transparency)
en contributoro de la compania del compania del compania de la compania del la compania de la compania della della compania de		story multi-family only)			
Windows		*			
Doors	2	yes	.60	.53	yes
Skylight					
2. Structura	al Fenestrat g lowering :	window guide and codes ion: New or enlarged openin sill heights in a foundation w		enlarged baseme	ent egress windows
	<u> </u>				
VALUE OF CO	ONSTRUCTION	ON (materials and labor): \$ =	7,000 =	<u>٠</u>	
JOBSITE SUF	PERVISOR C	ONTACT INFO: Name Joel V	Vhite	etresia iran tita	Phone 970-412-5513
SUBCONTRA					
Electrical		Mechanical		Plumbing	
Structural Fra	aming (woo	d only)			
Applicant: I h	ereby ackno	wledge that I have read this ap	plication and	state that the ab	oove information is correct and agre te laws regulating building construct
Applicant Sig			Type or Pri	nt Name Joel W	/hite

THIS APPLICATION EXPIRES 180 DAYS FROM APPLICATION DATE

Email glass.doctor.joel@gmail.com







