

Hi Kaci,

Matt was that way and looked at the site and wrote the email below. Let me know if anything else is needed.

From: Adams, Matthew D. </DAdams@AtlantaGa.Gov> Sent: Wednesday, January 18, 2023 10:11 AM To: Coleman, Susan <SUColeman@AtlantaGa.Gov>; Fleming, Londell <Iofleming@AtlantaGa.Gov> Subject: RE: [EXTERNAL] Fwd: FW: 814 Austin Ave current state

All,

The condition on site definitely requires a revision to our previous approval. Susan, this would be a type II certificate of appropriateness for "revisions to previously approved plans" which would be reviewed by the Commission due to the ongoing stop work orders on the site.

Matt Adams, CNU-A

Interim Assistant Director Office of Design, Historic Preservation Studio City of Atlanta Department of City Planning 55 Trinity Ave, Ste. 3350, Atlanta, Ga, 30303 Direct (404) 985-5772 Office (404) 546-0134 mdadams@atlantaga.gov www.atlantaga.gov/goverment/departments/city-planning

Please go to the Department of City Planning's official website for the most current information on our operational responses to COVID-19.

Have a specific property question? Check out the Department of City Planning's GIS website for online mapping resources.

From: Adams, Matthew D. <<u>MDAdams@AtlantaGa.Gov</u>> Sent: Friday, January 13, 2023 2:06 PM To: Coleman, Susar <<u>SUColeman@AtlantaGa.Gov</u>>; Fleming, Londell <<u>Iofleming@AtlantaGa.Gov</u>> Subject: Re: [EXTERNAL] Fwd: FW: **941** Austin Ave current state

Im here now. I will take some photos and we can discuss.

Matt Adams, CNU-A

Interim Assistant Director Office of Design, Historic Preservation Studio Citly of Atlanta Department of Citly Planning 55 Trinity Ave, Ste. 3350, Atlanta, Ga, 30303 Direct (404) 330-6201 Office (404) 546-0134 mdadams@atlantaga.gov www.atlantaga.gov/goverment/departments/citly-planning

Sent from a mobile device. Please excuse any typos!





Application #:	
Date Accepted:	

Application for Certificates of Appropriateness, Staff Review, and Review and Comment

Applicant's Name	Kaci Palo							_
Applicant's Address		d Atlan	ta Hwy					_
City Covington						Zip	30307	_
Phone #770-87							SUNLIMITEDLLC.CC	<u>)</u> M
DESCRIPTION OF								
Property Address _	941 Austin	Ave N	E Atlant	a, GA 30	0307			
Zoning Category	R-5		Be	eltline?	In SPI	/ MR / [MRC / NC?	
	o all new or conve	ersion multi	family resid	ential rental	projects with te	. ,	more units in either the hts, or AUC). For these	

DESCRIPTION OF PROJECT:

Describe clearly and in detail all proposed construction, alterations, repairs and other changes to the exterior appearance or site. The Office of Design Staff will use this description to determine the appropriate application type. Additional pages may be used if more space is needed, but "See Attached" will not be accepted

projects, applicant must complete and submit the supplemental Inclusionary Zoning Certification form.

Our proposed scope of work for this project include and addition to the back of the house that will enclose the original back deck. Extending basement storage and mechanical storage. Replacing all wood rot and non-functioning/rotting windows. Adding a second story to the house, along with a new roof. Installing new siding, windows trim, exterior paint and exterior doors. Redoing all interior framing, plumbing, electrical, HVAC, insulation, sheetrock, wood flooring, interior trim and doors, interior paint, cabinets, countertops, tile in bathrooms, light and plumbing fixtures. A detached back two car garage with storage space. The back garage will be entirely new construction, consisting of a new concrete slab, framing, windows, trim & doors, roof, mechanicals, insulation, sheetrock, paint and gutters. Landscaping and grounds will also be completed on this project.

The Office of Design Accepts Applications Monday through Friday from 8:30 Am to 3:00 PM Incomplete applications will NOT be accepted.

Application Checklist

Required Submission Materials: (*Incomplete applications will NOT be accepted*). All submitted materials are retained by the Office of Design and not returned to the applicant.

Many scopes will require Compatibility Comparisons. Please see District regulations for specific requirements.

- Alterations with no structural changes (repairs/replacement):
 - Photographs
 - o Manufacturer's spec. sheets for replacement products
- Alterations with structural changes:
 - Elevations
 - Photographs
- Additions and new construction:
 - o Site Plans
 - Elevations
 - Photographs
- Specific requirements for window and door work:
 - Window and door repair:
 - Photographs of each window and door proposed for repair keyed to a rough floor plan
 - Description of the repair methods that will be used
 - Window and door replacement:
 - Photographs of each window and door proposed for replacement keyed to a rough floor plan
 - Elevations (only if windows are changing location)
 - Information detailing the infeasibility of repairing the existing windows and doors including various methods considered; and,
 - Information on the proposed replacement window product (Manufacturers Spec. Sheet)
- Specific requirements for fences and site work:
 - To-scale site plans which show all 4 corners of the subject property and the structure
 - For fences and walls:
 - The location, height, and materials of the fence/wall clearly noted on the site plan
 - For paving:
 - The location and materials of the paving clearly noted on the site plan
 - $\circ \quad \text{For decks}$
 - The location of the deck clearly noted on the site plan

While it is not required and will not affect the outcome of your review, the Office of Design Staff strongly recommends that you contact your neighborhood association for their input on your project before submitting for a review.

I HEREBY AUTHORIZE THE OFFICE OF DESIGN STAFF AND MEMBERS OF THE ATLANTA URBAN DESIGN COMMISSION TO INSPECT THE PREMISES OF THE ABOVE DESCRIBED PROPERTY. I HEREBY DEPOSE AND SAY THAT ALL STATEMENTS HEREIN AND ATTACHED STATEMENTS SUBMITTED ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT OR AGENT

for, DOUG YOUNG, EXECUTIVE DIRECTOR

Authorization by Property Owner

(Required only if the applicant is not the owner of the property subject to the proposed application.)

(Please Print Clearly)

I, Tyler Alev	(OWNER'S NAME) SWEAR AND AFFIRM THAT I AM			
THE OWNER OF THE PROPERTY AT _	941 Austin Ave Atlanta, Ga 30307 (PROPERTY			
ADDRESS). AS SHOWN IN THE RECOR	RDS OF Fulton COUNTY, GEORGIA, WHICH IS THE			
SUBJECT MATTER OF THE ATTACHED APPLICATION. I AUTHORIZE THE PERSON NAMED BELOW TO				
FILE THIS APPLICATION AS MY AGEN	Г.			

NAME OF APPLICANT:

LAST NAME PALO	FIRST NAME KACI
ADDRESS 10449 OLD ATL HWY	SUITE
CITY COVINGTON STATE GA	ZIP CODE 30014

OWNER'S TELEPHONE NUMBER: 5208706410

SIGNATURE OF OWNER

Tyler Alev PRINT NAME OF OWNER

PERSONALLY APPEARED BEFORE ME THE ABOVE NAMES, WHO SWEARS THAT THE INFORMATION CONTAINED IN THIS AUTHORIZATION IS TRUE AND CORRECT TO THE BEST KNOWLEDGE AND BELIEF.

NOTARY PUBLIC

DATE

