HISTORIC PRESERVATION COMMISSION REVIEW

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
PURSUANT TO THE PROVISIONS OF CHAPTER 48
HISTORIC PRESERVATION LAW OF THE VILLAGE OF GREENPORT

DATE OF APPLICATION: _04/13/2020_

LOCATION OF PROPERTY: _138 BAY AVE._

SUFFOLK COUNTY TAX MAP NUMBER: _473801 5.-2-18.1_

PROPERTY OWNER: _CAMERON BRIEN_

ADDRESS: _____ PHONE: _____

EMAIL ADDRESS: _____

ARCHITECT/DESIGNER: _MARK SCHWARTZ - ARCHITECT_

ADDRESS: _PO BOX 933 CUTCHOGUE_ PHONE: _631 734 4185_

EMAIL ADDRESS: _mksarchitect1935@optonline.net_

Type of Proposed Work

☐ COMMERCIAL   ☒ RESIDENTIAL

Site Work

____ FENCE
____ DRIVEWAY, WALK, PATIO, OTHER PAVEMENT
____ MAJOR EXCAVATION OR REGRADING, OR BERM
____ SWIMMING POOL, TENNIS COURT
____ OTHER STRUCTURAL LANDSCAPE ELEMENT
____ SIGNAGE- SUBMIT SCALE DRAWINGS TO INDICATING TO FOLLOWING:
- SIZE OF EACH SIGN
- COLOR
- FONT
- LOCATIONS OF ALL SIGNAGE ON BUILDING
- PROPOSED MATERIALS

Landscape Planting

____ HEDGE ALONG STREET AND/OR PROPERTY BOUNDARY LINES
____ PLANTINGS INTENDED TO SCREEN OTHER WORK DESCRIBED IN THIS APPLICATION

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Buildings

____ NEW CONSTRUCTION
__X__ ADDITION
DEMOLITION & RE-BUILD FRONT VESTIBULE
____ REMOVAL
____ ACCESSORY BUILDING

Form HPC1

Building Alterations

____ EXTERIOR WALL MATERIAL
____ ROOF MATERIAL AND COLOR
____ CHIMNEY MATERIAL
____ FOUNDATION MATERIAL
____ DOORWAYS (INCLUDING STORM/SCREEN DOORS)
____ WINDOWS (INCLUDING STORM/SCREEN SASH)
____ PORCHES AND STEPS
____ TRIM
____ GUTTERS AND LEADERS
____ PAINT AND STAIN
__X__ OTHER - *THREE WALLS OF FRONT VESTIBULE*

PROVIDE A GENERAL DESCRIPTION OF THE PROPOSED WORK (USE ADDITIONAL SHEETS IF NECESSARY, REFER TO THE ACCOMPANYING EXHIBITS).

DEMOLISH THREE WALLS OF EXISTING FRONT (SOUTH) ENTRY VESTIBULE & RE-BUILD AS SHOWN ON PLANS. THE EXISTING WOOD FLOOR ~~WILL~~ TO BE REMOVED AND REPLACED W/ TILE FLOOR. THE EXISTING BRICK ENTRY STEPS & WALLS TO REMAIN. THE EXISTING ROOF, FASCIA & SOFFITS TO REMAIN. THE EXISTING CHIMNEY SHALL BE REMOVED & RE-BUILT AS SHOWN ON PLANS.

LIST ALL EXHIBITS SUBMITTED WITH THIS APPLICATION (REFER TO THE INSTRUCTIONS FOR THE REQUIRED SUBMISSIONS).

OTHER APPROVALS REQUIRED: _____

SIGNATURE OF OWNER OR AUTHORIZED AGENT: _____ *MARK SCHWARTZ, AIA ARCHITECT*

DATE: *04/13/2020*

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