

## CERTIFICATE OF APPROPRIATENESS PLACARD

for Raleigh Historic Resources

# Address OAKWOOD Historic District Historic Property 154-17-MW Certificate Number 09-25-2017 Date of Issue 03-25-2018 Expiration Date

This card must be kept pasted in a location within public view until all phases of the described project are complete. The work must conform with the code of the City of Raleigh and laws of the state of North Carolina. When your project is complete, you are required to ask for a final zoning inspection in a historic district area. Telephone the RHDC office at 832-7238 and commission staff will coordinate the inspection with the Inspection, your Certificate of Appropriateness is null and void.

Remove magnolia tree and replace with red maple

Signature, V Subsa 1566

Raleigh Historic Development Commission

Pending the resolution of appeals, commencement of work is at your own risk.

### Raleigh Historic Development Commission – Certificate of Appropriateness (COA) Application



Development Services
Customer Service Center
One Exchange Plaza
1 Exchange Plaza, Suite 400
Raleigh, North Carolina 27601
Phone 919-996-2495
eFax 919-996-1831



| <ul> <li>Minor Work (staff review) – 1 copy</li> <li>Major Work (COA Committee review) – 10 copies</li> <li>Additions Greater than 25% of Building Square Footage</li> <li>New Buildings</li> <li>Demo of Contributing Historic Resource</li> <li>All Other</li> <li>Post Approval Re-review of Conditions of Approval</li> </ul> | For Office Use Only  Transaction # 528 492  File # 154-17- MW  Fee 2900  Amount Paid 2900  Received Date 9/7/2017  Received By P. Best |  |  |  |
|---|--|--|--|--|
| Property Street Address 306 ELM STREET  |  |  |  |  |
| Historic District OAK WOODS   |  |  |  |  |
| Historic Property/Landmark name (if applicable)   | PENVEN-CREW HOUSE  |  |  |  |
| Owner's Name JOHN C. CROW, DENISE   | M. PENVEN CREW depth in feet) 1041   |  |  |  |
| Lot size (width in feet)  | depth in feet) 104   |  |  |  |
| For applications that require review by the COA Committee (Major Work), provide addressed, stamped envelopes to owners of all properties within 100 feet (i.e. both sides, in front (across the street), and behind the property) not including the width of public streets or alleys (Label Creator).                            |  |  |  |  |
| Property Address  | Property Address   |  |  |  |
| NA  |  |  |  |  |
|   |  |  |  |  |
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I understand that all applications that require review by the commission's Certificate of Appropriateness Committee must be submitted by 4:00 p.m. on the application deadline; otherwise, consideration will be delayed until the following committee meeting. An incomplete application will not be accepted.

| Type or print the following:   |  |                 |  |  |
|--|--|-----------------|--|--|
| Applicant JOHN C. C  | LREN                                       |                 |  |  |
| Mailing Address 306 ELM  | 87   |                 |  |  |
| city RAEGH   | State NC                                   | Zip Code 27601  |  |  |
| Date 9-2-17  | Date 9-2-17 Daytime Phone 919 - 828 - 1127 |                 |  |  |
| Email Address PEN VENCREW a YAHOO. COM   |  |                 |  |  |
| Applicant Signature  |  |                 |  |  |
|  | •  |                 |  |  |
|  |  | Office Use Only |  |  |
| Will you be applying for rehabilitation tax credits for this project? ☐ Yes ☐ No  Type of Work  Type of Work  No   |  |                 |  |  |
| The state of the s |  |                 |  |  |

| Design Guidelines - Please cite the applicable sections of the design guidelines (www.rhdc.org). |                         |  |  |  |
|--|-------------------------|--|--|--|
| Section/Page   | Topic                   | Brief Description of Work (attach additional sheets as needed)   |  |  |
| 2.3-Sp13   | SITE FERENCES + RANTING | REMOVE DISEASED MARNOZIA  GRANDIFLORA FROM BACK of LOT  TREE HAS A BACTERIAL INFECTION  PER REPORT FROM CERTIFIEDS  ARBORIST AND CREATES A HAZARD  TO SURROUNDING CONTRIBUTING  PROPERTIES.  TREE TO BE REPLACED WI  RED IN APLE - ACER RUBRIM |  |  |

| Minor Work Approval <u>(office use only)</u>   |  |  |  |
|--|--|--|--|
| Upon being signed and dated below by the Planning Director or designee, this application becomes the Minor Work Certificate of Appropriateness. It is valid until 3 Please post the enclosed placard form of the certificate as indicated at the bottom of the card. Issuance of a Minor Work Certificate shall not relieve the applicant, contractor, tenant, or property owner from obtaining any other permit required by City Code or any law. Minor Works are subject to an appeals period of 30 days from the date |  |  |  |
| of approval.  Signature (City of Raleigh) Mina Robb Date 9/25/17   |  |  |  |

| TO BE COMPLETED BY APPLICANT |   |              | TO BE COMPLETED BY CITY STAFF |                           |                            |  |
|------------------------------|---|--------------|-------------------------------|---------------------------|----------------------------|--|
|                              |   | YES          | N/A                           | YES                       | NO                         | N/A  |
| and oth<br>below to          | 8-1/2" x 11" or 11" x 17" sheets with written descriptions and drawings, photographs, her graphic information necessary to completely describe the project. Use the checklist to be sure your application is complete.  Nork (staff review) – 1 copy  | $\checkmark$ |                               |                           |                            |  |
| Major V                      | Nork (COA Committee review) – 10 copies   |              |                               | aviation)<br>et pelitical |                            |  |
| 1.                           |   |              |                               |                           |                            |  |
| 2.                           | Description of materials (Provide samples, if appropriate)  |              |                               |                           |                            |  |
| 3.                           | <b>Photographs</b> of existing conditions are required. Minimum image size 4" x 6" as printed. Maximum 2 images per page.   |              | /                             |                           |                            |  |
| 4.                           | Paint Schedule (if applicable)  |              | d                             | See Ha                    |                            |  |
| 5.                           | Plot plan (if applicable). A plot plan showing relationship of buildings, additions, sidewalks, drives, trees, property lines, etc., must be provided if your project includes any addition, demolition, fences/walls, or other landscape work. Show accurate measurements. You may also use a copy of the survey you received when you bought your property. Revise the copy as needed to show existing conditions and your proposed work. | D            |                               |                           |                            |  |
| 6.                           | Drawings showing existing and proposed work   |              |                               |                           |                            |  |
|                              | ☐ Plan drawings   |              |                               |                           |                            |  |
|                              | ☐ Elevation drawings showing the façade(s)  |              |                               | des Pige<br>September     |                            | itar ipiest.   |
|                              | □ Dimensions shown on drawings and/or graphic scale (required)  |              | M                             | Topice vine               |                            | ett fille sa<br>Attack at the  |
|                              | □ 11" x 17" or 8-1/2" x 11" reductions of full-size drawings. If reduced size is<br>so small as to be illegible, make 11" x 17" or 8-1/2" x 11" snap shots of<br>individual drawings from the big sheet.  |              |                               | = 10<br>- 20 m = 1        |                            |  |
| 7.                           | Stamped envelopes addressed to all property owners within 100 feet of property not counting the width of public streets and alleys (required for Major Work). Use the <u>Label Creator</u> to determine the addresses.  |              | Q                             |                           |                            | Tentral  |
| 8.                           | Fee (See Development Fee Schedule)  |              |                               |                           |                            | elet e   |
|                              |   |              |                               |                           | SCHOOL STATE OF THE SECOND | THE RESIDENCE OF THE PARTY OF T |

#### Arbormax tree service

4236 Rockside Hills DR Raleigh, NC 27603



Estimate #5276

00/04/0

Sent On 09/01/2017

Phone 919-412-6790

Email arbormaxx@gmail.com

Website www.arbormaxtree.com

Chris Crew 306 Elm Street Raleigh, North Carolina 27601

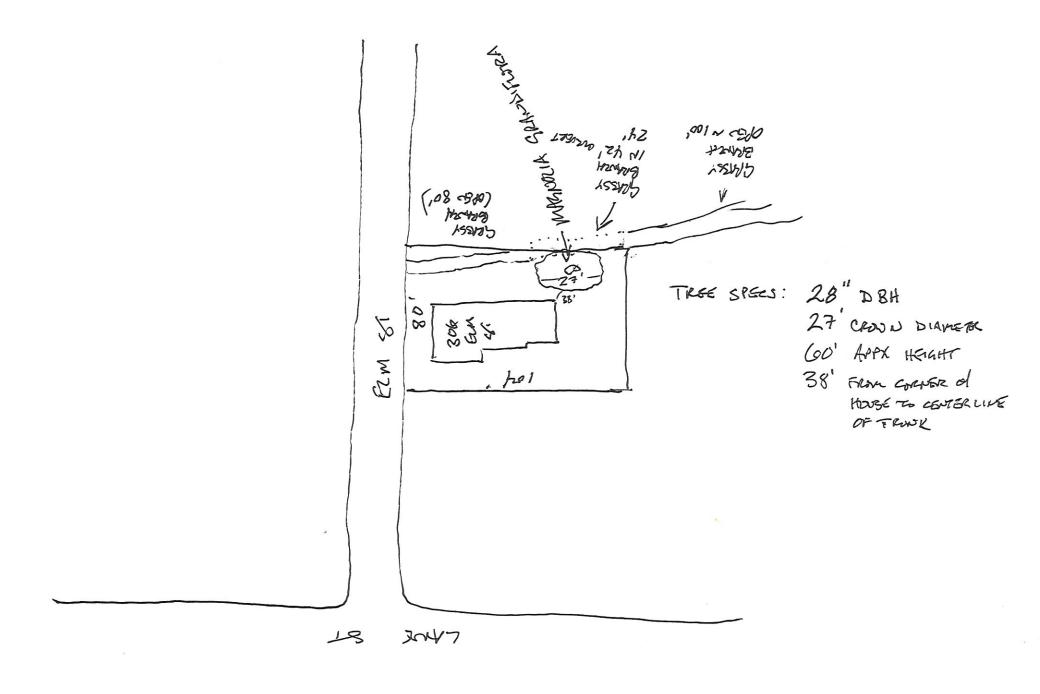
| Service / Product | Description  | Total   |
|-------------------|--|---------|
| Tree assessment   | An inspection was conducted on September 1st 2017 to evaluate health concerns of a Magnolia approximately 28" DBH back left corner of the property.  Findings- The top 1/3 of the tree shows a significant lack of foliage production which is typically related to a bacterial infection.  Upon closer examination, evidence of bacterial slime flux was identified in the lower portion of the trunk, which extends from the ground and up the trunk approximately 8-10 feet. This condition is not treatable. If the tree cannot limit the spread of this infection the tree will likely continue to decline to the point of tree death.  The tree has a notable lean toward the home, and is close enough to the home that in the event of whole tree failure, some damage to the home would certainly occur. The property owners concern for risk of whole tree failure is increased due to the water drain system that runs through the critical root zone which could limit anchorage of the roots.  Conclusion- With the uncertainty of recovery from a significant bacterial infection, coupled with the property owners low overall risk tolerance in regards to questionable long term stability, our recommendation is for the removal of the tree while the tree is still safe enough to climb and dismantle.  Joseph High ISA Certified Arborist Tree Risk Assessment Qualified SO-6868a | \$75.00 |

Total

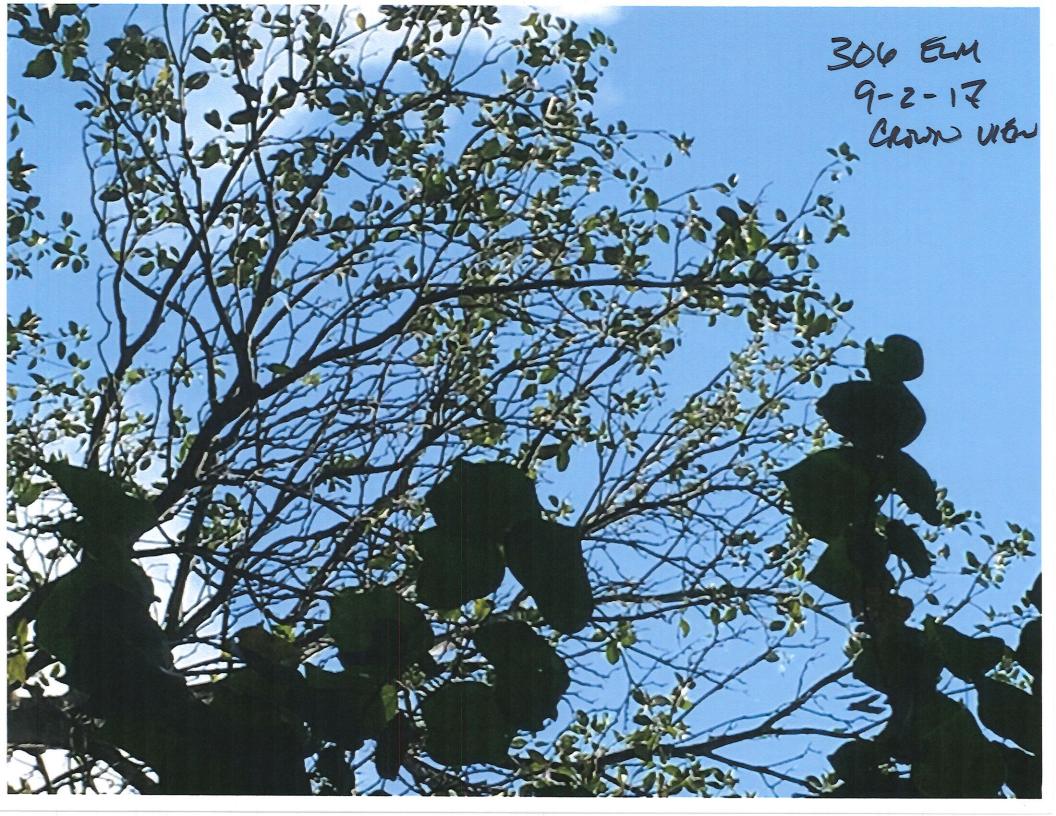
\$75.00

If you have any questions please contact me at 919-737-5335 Thanks, Joseph High ISA Certified Arborist Tree Risk Assessment Qualified

Above is a guaranteed written estimate for the outlined work. All work is guaranteed to be as specified and performed in accordance with drawings and specifications submitted for above work, and completed in a substantial workmanlike manor. All pruning will conform to ANSI A-300 standards. All mulch and woodchips generated from the stump grinding process will be left in place. We are not responsible for turf damage or cracking of driveways or sidewalks under the weight of our equipment. ALL PAYMENTS ARE DUE THE DAY OF COMPLETION. THERE ARE NO EXCEPTIONS. Commercial clients need to obtain pre authorization for net 30 terms. All commercial accounts that pay late will be charged an additional 4% fee. If a w9 or







#### 306 ELM 9-2-17



