APPLICATION



Application No.:

Meeting Date: 6/26/97

Board of Architectural Review			
Property Address:	36 Murray Street	TMS No.: 457 - 11 - 2	- 73
Request	For	<u> </u>	
☐ Conceptual	Repairs/ Rehabilitation	☐ Presentation	
☐ Preliminary	☐ New Construction	☐ Appeal for Rehearing	
M Final	☐ Demolition	☐ Appeal Decision of Preservation Officer	
Property Owner: DR & DRS . STRAIT F FAIREY Daytime Phone:			
Applicant: RANDOCPH F MARTZ Daytime Phone: 722 1339			
Applicant's Mailing Address: (67 COMING. STREET			
City CHANCE	STON .	State SC Zip 29403	
Applicant's relationship	p: □Attorney ➤ Design Professional	T THE R IS NOT THE RESERVE OF THE RE	ipplier / ifacturer
Description: In your own words describe what you are requesting: (D) ENCANCE EXISTING DOON EAST EVENATION (D) NEW GLASS DOON IN BACK (NORTH) PONCH (3) NEMOUE EXISTING DECONATIVE INON WONTH PONCH) INSTAGE RAILINGS TO MATCH EXISTING SOUTH PONCH NAILINGS			
14 1617-05		(a)	
Three copies of the following information is required: (check information submitted) Tax map indicating the subject property Photographs, including streetscape showing adjacent buildings, facades visible from street, details of areas where work is to be performed Site plan or plat indicating location of new construction or additions in relation to property boundaries and existing on-site structures Plan drawings to scale Elevations of all sides affected or to be constructed under this request Sections indicating type of materials, extent and scope of request Manufacturer's catalog and technical data on purchased products			

I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property or the authorized representative of the owner. I authorize the subject property to be posted and inspected, and the application heard by the Board of Architectural Review of the City of Charleston on the

An application is incomplete until all required information and fees are submitted. Incomplete applications will not be

meeting date specified.

Applicant's Signature:

placed on a board agenda until an application is complete.

Date: JUNE

For Office Use Only Application Information Date Received Time Easemenmt Holder Staff Person HCF Pres. Society Other: Zoning Architectural ☑ Old & Historic District Fee Amount: 3 Rating Old City District Height Flood Zone/Elev. Construction Receipt No. District Date(s) Request: Staff Review: This request for the above referenced property has been reviewed and the findings are as follows: 🛛 Approval Denial Deferred Approval for repairs and or painting without changes to existing appearance Approval with the following conditions ☐ Further Action / Approval Requires Board Hearing(s); SR Preservation Officer Date Board of Architectural Review: The Board of Architectural Review has heard this request for the above referenced property. Its findings are as follows: Approval Denial Deferred Approval with the following conditions:

The decision of the Board of Architectural Review does not expire.

☐ Further Action/Final Approval Requires Board Hearing(s);

Preservation Officer for further action.

Chairman

An appeal of a Board decision stays all further action on applications.
 The approval by the Board of Architectural Review is not to be construed as approval by the Building Inspection Division for commencement of construction. Prior to construction, all plans and specifications must be reviewed and approved by the Building Inspections Division and a building permit must be obtained and posted on the property.

No.:

Date

Tinal Approval is granted upon fulfillment of the above specified conditions and is referred to the

City of Charleston
Department of Planning & Urban Development
75 Calhoun Street / 3rd Floor
Charleston 29401-3506