31/6 3824 Warner St. OM 24-87

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**DWNERSHIP CODE:** 

### **Historic Preservation Commission**

100-Maryland-Avenue, Rockville, Maryland - 20850 279-1327

APPLICATION FOR
HISTORIC PRESERVATION COMMISSION
51 Monroe Street Room 1009
Rockville, MD 20850
279-8097

TAX ACCOUNT # NAME OF PROPERTY OWNER James & Barbara Wagner TELEPHONE NOW 1.93 **CONTRACTOR REGISTRATION NUMBER** TELEPHONE NO. (Include Area Code) **REGISTRATION NUMBER** LOCATION OF BUILDING/PREMISE Street Warner St. 38*34* House Number **Election District** Subdivision B. B. Detric Liber. Parcel TYPE OF PERMIT ACTION: (circle one) Circle One: A/C 1A. Slab Room Addition Porch Deck Fireplace Shed Solar Woodburning Stove Construct Extend/Add Alter/Renovate Repair Wreck/Raze Fence/Wall (complete Section 4) Other Tree removal Install Revocable Revision Move 1B. **CONSTRUCTION COSTS ESTIMATE \$** IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # 1C. 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY IS THIS PROPERTY A HISTORICAL SITE? . 1F. PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS TYPE OF SEWAGE DISPOSAL TYPE DF WATER SUPPLY 2A ( ) WSSC 02 () 01 ( ) -WSSC 02 ( ) Well ( ) Other 03 ( ) Other PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL \_feet \_ \_inches 4A. Indicate whether the fence or retaining wall is to be constructed on one of the following locations: 4B. 1. On party line/Property line 2. Entirely on land of owner \_ 3. On public right of way/easement. (Revocable Letter Required). I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction will comply with plans approved by all agencies listed and I hereby acknowledge and accept this to be a condition for the issuance of this permit. Signature of owner or authorized agent (agent post have signature notarized on back) APPROVED -For Chairperson, Historic Preservation Signature APPLICATION/PERMIT ND: FILING FEE: \$ DATE FILED: PERMIT FEE:\$ DATE ISSUED: **BALANCE \$** 

SEE REVERSE SIDE FOR INSTRUCTIONS

RECEIPT NO: \_

THE FOLLOWING ITEMS MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION

DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used:)

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| (If more space is needed, attach addit | ional sheets on plain o | r lined paper to this | application) |         |                 |

ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed or existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

MAIL OR DELIVER THE APPLICATION AND ALL REQUIRED DOCUMENTS TO THE:
HISTORIC PRESERVATION COMMISSION
100 MARYLAND AVENUE
ROCKVILLE, MARYLAND 20850



## **Historic Preservation Commission**

-100-Maryland-Avenue; -Rockville; -Maryland - 20850 -279-1327

HISTORIC PRESERVATION COMMISSION
51 Monroe Street Room 1009
Rockville, MD 20850
279-8097

# APPLICATION FOR HISTORIC AREA WORK PERMIT

| IAX    | (CCUUNI #  |  | )                                     |   |                                       |
|--------|--|--|---------------------------------------|---|---------------------------------------|
| NAME   | OF PROPERTY OWNER Jame. (Contract/Purchaser) ESS 389 Warner RACTOR 7/a   | s + Barbara W  | TELEPHONE                             | NO301-949-5016                          |                                       |
|        | (Contract/Purchaser)   |  | (Include Area (                       | Code)                                   |                                       |
| AOOR   | ESS 3889 Warner  | St. Kensings   | m MD                                  | 20895                                   | ZIP                                   |
| CONT   | RACTOR 71/a  | )  | TEL EPHONE                            | NO. m/a                                 | ZIP                                   |
|        |  | CONTRACTOR REGISTRA  | TION NUMBER                           |   |                                       |
| PI ANS | SPREPAREO BY   | ·  | TELEPHONE                             | 1                                       |                                       |
|        |  |  | (Include Area (                       |   |                                       |
|        |  | REGISTRATION NUMBER  |                                       | · · · · · · · · · · · · · · · · · · ·   | <del>-</del>                          |
|        |  |  | · · · · · · · · · · · · · · · · · · · |   |                                       |
| LOCA   | TION OF BUILOING/PREMISE   | •  |                                       | ,                                       |                                       |
| 11     | Number 3824  | sum Warner   | 2.54                                  |   |                                       |
|        |  |  |                                       |   |                                       |
| Town/  | city Kensington  |  | laction District                      |   |                                       |
| TOWIN  | City The Company of t | 01   | C. I'                                 | 1 1.                                    |                                       |
| Neares | t Cross Street Treeman   | i Mace;  | CONNECTICE                            | it Mue.                                 |                                       |
| 1.4    | t Cross Street Freeman   | Cubatistica R R  | Dotrick                               |   | •                                     |
| LOI    | Block  | Subulvisiuii   | 22011                                 | +                                       |                                       |
| Liber_ | Folio  | Parcel   |                                       |   |                                       |
|        |  |  |                                       |   |                                       |
| 1A.    | TYPE OF PERMIT ACTION: (circle<br>Construct Extend/Add<br>Wreck/Raze Move Install  | one)   | Circle One: A                         | C Slab Roc                              | m Addition                            |
| `      | Construct Extend/Add   | Alter/Renovate Repair  | Porch Oeck                            | Fireplace Shed Solar                    | Woodburning Stove                     |
|        | Wreck/Raze Move Install  | Revocable Revision   | Fence/Wall (co                        | mplete Section 4) Other /               | e remodel                             |
| _      | CONSTRUCTION COSTS ESTIMAT   | man makenya and property of the control of the cont |                                       |   |                                       |
| 1B.    | CONSTRUCTION COSTS ESTIMAT   | E\$  | · · · · · · · · · · · · · · · · · · · |   |                                       |
| 1C.    | IF THIS IS A REVISION OF A PRE   | VIOUSLY APPROVEO ACTIV   | E PERMIT SEE PERMIT                   | #                                       | · · · · · · · · · · · · · · · · · · · |
| 10.    | INOICATE NAME OF ELECTRIC U  |  |                                       |   | <del></del>                           |
| 1E.    | IS THIS PROPERTY A HISTORICA   | L SITE?  |                                       |   |                                       |
|        | :  |  |                                       |   |                                       |
|        | TWO: COMPLETE FOR NEW CONST  |  |                                       |   | ,                                     |
| 2A.    | 1 1 1 2 01 02117102 0101 00712   |  | 2B. TYPE OF WA                        |   |                                       |
|        | 01 ( ) WSSC \ 02 ( ) Sel   | itic   |                                       | SC 02 ( ) Well                          |                                       |
|        | U3 ( ) Uther   |  | 03 ( ) 01                             | ner                                     |                                       |
| DADT   | THREE: COMPLETE ONLY FOR FE  | NCE/PETAINING WALL   | •                                     |   |                                       |
| 4A.    | HEIGHTinch   |  |                                       |   |                                       |
| 4B.    |  |  | one of the following location         | nos:                                    |                                       |
| 70.    | 1. On party line/Property line   | _  |                                       |   |                                       |
|        | 2. Entirely on land of owner   |  |                                       |   |                                       |
|        | 3. On public right of way/easement   |  | (Revocable Letter Re                  | quired).                                |                                       |
|        |  |  |                                       |   |                                       |
| Lhere  | by certify that I have the authority t   | o make the foregoing applicat  | ion, that the application is          | correct, and that the constru           | ction will comply with                |
|        | approved by all agencies listed and I her  |  |                                       |   |                                       |
|        | 1 . 4  |  |                                       |   | •                                     |
| `      | Back 20 26 (1/1  | caren  | T.                                    | 5/2 2/87                                | <u></u>                               |
| Sign   | ature of owner or authorized agent (age  | ent must have signature notarize   | nd on back)                           | Oate                                    |                                       |
| Jigiii | ******************   | *******************  | * * * * * * * * * * * * * * * * * * * | · * * * * * * * * * * * * * * * * * * * | ******                                |
|        | \ <u>{</u>   |  |                                       |   |                                       |
| APPR   | OVEO   | For Chairperson, Historic Pre  | eservation Commission                 | •                                       |                                       |
|        |  | v/ //  | La Halm                               | Date 6/9/8                              | _                                     |
| OISAF  | PPROVEO  | Signature // XXX   | la Balin                              | Oate/ 7 / 8                             | <del></del>                           |
|        |  | 3 / C = A  |                                       |   |                                       |
| APPL   | CATION/PERMIT NO:  | 15/-87 A   |                                       |   |                                       |
| OATE   | FILEO:   |  | PERMIT FEE: \$                        |   |                                       |
|        | ISSUEO:  |  | BALANCE\$                             | FEE WAIVED                              |                                       |
| OWNE   | ERSHIP COOE:   |  | RECEIPT NO:                           | FEE WAIVED                              | ·                                     |

THE FOLLOWING ITEMS MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION

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| • |    |  | <br> |       |   |      |   |  |   |

(If more space is needed, attach additional sheets on plain or lined paper to this application)

ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed of existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

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ROCKVILLE, MARYLAND 20850

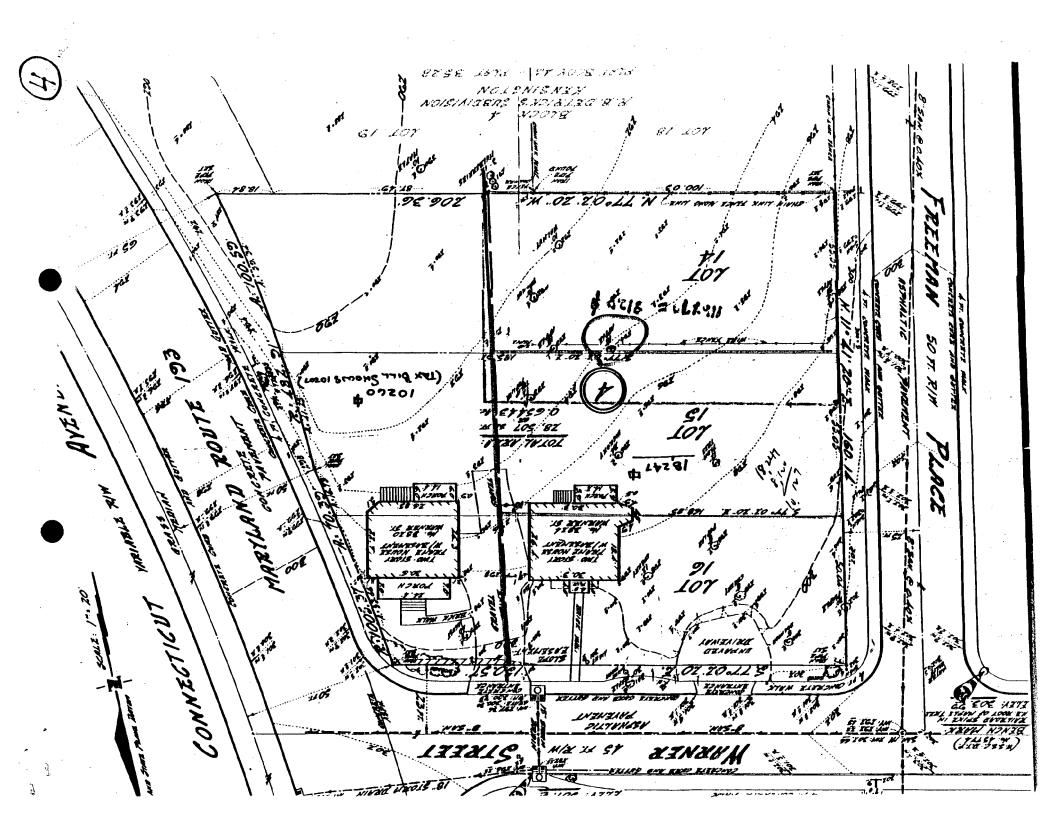
THE FOLLOWING ITEMS MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION

DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used:)

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ROCKVILLE, MARYLAND 20850



#### MONTGOMERY COUNTY HISTORIC PRESERVATION COMMISSION

#### LOCAL ADVISORY COMMITTEE REVIEW FORM

#### EXTERIOR ALTERATIONS

| a. Located within the KENSINGTON historic of the third is Master Plany Atlas historic district (circle, c. Address of Property: 3824 WARNER ST KENSINGTON, MD  d. Property owner's name, address and phone number:  JAMES & BARBACK WAGNER  AROUE  (h) 949-5016 (w)  e. Is this property a contributing resource within the historic resources. Will this work impact other contributoric resources? Yes No  |      |   | and the second s |
|--|------|---|--|
| c. Address of Property: 3824 WARNER ST  KENSINGTON, MD  d. Property owner's name, address and phone number:  JAMES & BARBARA WAGNER  AROUE  (h) 949-5016 (w)  e. Is this property a contributing resource within the hidistrict? Yes No  f. On a map of the district locate this property and any historic resources. Will this work impact other contributoric resources? Yes No  II. Description of work proposed  a. Briefly describe proposed work:  REMOVE APPLE TREE  b. Is this work on the front. real, or side of the structor.  c. Is the work visible from the street? No  d. What are the materials to be used?  e. Are these materials compatible with existing materials | a. I | Located within the <u>KENSINGTON</u> his                        | storic district.   |
| d. Property owner's name, address and phone number:    JAMES   | b. : | This is a Master Plan/Atlas historic district                   | (circle one).  |
| d. Property owner's name, address and phone number:    JAMES   | c. 2 | Address of Property: 3824 WARNER ST                             | en e   |
| ARONE  (h) 949-5016 (w)  e. Is this property a contributing resource within the hidistrict? Yes No No  f. On a map of the district locate this property and any historic resources. Will this work impact other contributions of work proposed  a. Briefly describe proposed work:  PEMOVE APPLE TREE  b. Is this work on the front. real, or side of the structure.  c. Is the work visible from the street? No  d. What are the materials to be used?  e. Are these materials compatible with existing materials   |      |   |  |
| (h) 949-5016 (w)  e. Is this property a contributing resource within the hidistrict? Yes No  f. On a map of the district locate this property and any historic resources. Will this work impact other contribution of resources? Yes No  II. Description of work proposed  a. Briefly describe proposed work:  PEMOUE APPLE TIME  b. Is this work on the front. read, or side of the struct  c. Is the work visible from the street? No  d. What are the materials to be used?  e. Are these materials compatible with existing materials  | d. 1 | Property owner's name, address and phone number                 | <b>:</b>   |
| e. Is this property a contributing resource within the hidistrict? Yes No  |      | JAMES & BARBARA WAGNER  | _  |
| e. Is this property a contributing resource within the hidistrict? Yes   |      | ABONE   | _  |
| e. Is this property a contributing resource within the hidistrict? Yes   |      | ·   | <del>-</del><br>   |
| f. On a map of the district locate this property and any historic resources. Will this work impact other contradiction of work proposed  a. Briefly describe proposed work:  PEMOUE APPLE TREE  b. Is this work on the front, rear, or side of the structure.  c. Is the work visible from the street?  d. What are the materials to be used?  e. Are these materials compatible with existing materials.  |      | •   | -  |
| historic resources. Will this work impact other contributoric resources? Yes   | e. : | Is this property a contributing resource within district? YesNo | n the historic   |
| a. Briefly describe proposed work:  REMOVE APPLE TREE  b. Is this work on the front. rear, or side of the struct c. Is the work visible from the street?  d. What are the materials to be used?  e. Are these materials compatible with existing materials   | 1    | historic resources. Will this work impact other                 | and any adjacent<br>er contributing  |
| D. Is this work on the front. rear. or side of the struct.  c. Is the work visible from the street? No.  d. What are the materials to be used?  e. Are these materials compatible with existing materials.   | Des  | scription of work proposed                                      |  |
| D. Is this work on the front. rear. or side of the struct.  c. Is the work visible from the street? No.  d. What are the materials to be used?  e. Are these materials compatible with existing materials.   | a. 1 | Briefly describe proposed work:                                 |  |
| b. Is this work on the front. rear. or side of the struct.  c. Is the work visible from the street?  d. What are the materials to be used?  e. Are these materials compatible with existing materials  |      |   |  |
| c. Is the work visible from the street? ()  d. What are the materials to be used?  e. Are these materials compatible with existing materials   |      |   |  |
| c. Is the work visible from the street? ()  d. What are the materials to be used?  e. Are these materials compatible with existing materials   |      |   |  |
| <ul><li>d. What are the materials to be used?</li><li>e. Are these materials compatible with existing materials</li></ul>  | b.   | Is this work on the front. rear, or side of th                  | e structure?   |
| e. Are these materials compatible with existing material   | c    | Is the work visible from the street?                            |  |
|  | d. 1 | What are the materials to be used?                              |  |
|  |      |   | aterials? How? I   |
|  |      |   |  |

#### III.Recommendation of the Local Advisory Committee

- a. Approval of Work
  - 1. Which criteria found in the Ordinance for Historic Preservation (Sec. 24A-8-b of the Montgomery County Code) does this work meet?

- 2. What conditions, if any, must be met in order for the proposed work to meet the above criteria? (example: the proposed windows should be double hung to conform with existing windows)
- b. Disapproval of Work
  - On what grounds is disapproval recommended? Refer to Sec. 24A-8.
  - 2. How could this proposal be altered so as to be approved?
- IV. Additional comments

| Date on which application received:          | Ay 29, 1987  |
|--|--------------|
| Date of LAC meeting at which application was |              |
|  | Title: CHRMN |
| Member of: KENSINGTON CKC                    |              |
| Date: JUNE 8, 1987                           |              |
|  |              |

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