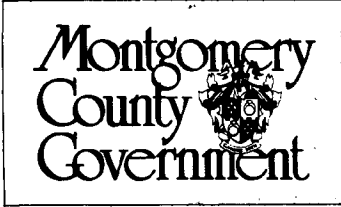


37/3 7209 Maple Ave.
OM 50-88



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 100-2-1-47

NAME OF PROPERTY OWNER UNIVERSITY DEVELOPMENT TELEPHONE NO. 301-435-6200
(Contract/Purchaser) (Include Area Code)

ADDRESS 10000 Rockville Pike, Suite 100 CITY Rockville STATE MD ZIP 20850

CONTRACTOR UNIVERSITY DEVELOPMENT TELEPHONE NO. 301-435-6200
CONTRACTOR REGISTRATIDN NUMBER _____

PLANS PREPARED BY UNIVERSITY DEVELOPMENT TELEPHONE NO. _____
(Include Area Code)

REGISTRATION NUMBER 1000

LOCATION OF BUILDING/PREMISE

House Number 10000 Street Rockville Pike

Town/City Rockville, MD Election District _____

Nearest Cross Street _____

Lot 2 Block 5 Subdivision _____

Liber _____ Folio _____ Parcel _____

1A. TYPE OF PERMIT ACTIDN: (circle one)

Construct	Extend/Add	<u>Alter/Renovate</u>	Repair	Circle One: A/C	Slab	Room Addition
Wreck/Raze	Move	Install	Revocable	Porch	Deck	Fireplace
			Revision	Fence/Wall (complete Section 4)	Shed	Solar
					Woodburning Stove	Other _____

1B. CONSTRUCTION COSTS ESTIMATE \$ 40,000

1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # _____

1D. INDICATE NAME OF ELECTRIC UTILITY CDMPANY Potomac

1E. IS THIS PROPERTY A HISTORICAL SITE? No

PART TWO: COMPLETE FOR NEW CDNSTRUCTION AND EXTEND/ADDITIONS

2A. TYPE OF SEWAGE DISPOSAL

01 <input checked="" type="checkbox"/> WSSC	02 <input type="checkbox"/> Septic
03 <input type="checkbox"/> Other _____	

2B. TYPE OF WATER SUPPLY

01 <input checked="" type="checkbox"/> WSSC	02 <input type="checkbox"/> Well
03 <input type="checkbox"/> Other _____	

PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL

4A. HEIGHT _____ feet _____ inches

4B. Indicate whether the fence or retaining wall is to be constructed on one of the following locations:

- On party line/Property line _____
- Entirely on land of owner _____
- 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] Signature of owner or authorized agent (agent must have signature notarized on back) [Date] Date

APPROVED _____ For Chairperson, Historic Preservation Commission

DISAPPROVED _____ Signature _____ Date _____

APPLICATION/PERMIT NO: 100-2-1-47 FILING FEE: \$ _____

DATE FILED: _____ PERMIT FEE: \$ _____

DATE ISSUED: _____ BALANCE \$ _____

OWNERSHIP CODE: _____ RECEIPT NO: _____ FEE WAIVED: _____

SEE REVERSE SIDE FOR INSTRUCTIONS



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850

279-1327
279-8097

HISTORIC PRESERVATION COMMISSION
51 Monroe Street Room 1009
Rockville, Md. 20850

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 106-27-47

NAME OF PROPERTY OWNER GUILD DEVELOPMENT ASSOC. TELEPHONE NO. 301 685 8588
(Contract/Purchaser) (Include Area Code)

ADDRESS 233 EAST REDWOOD ST #202 GARRETT BLDG. BALTO MD 21212
CITY STATE ZIP

CONTRACTOR J. GUIDERA AND CO TELEPHONE NO. 439 6993

PLANS PREPARED BY CONTRACTOR CONTRACTOR REGISTRATION NUMBER _____ TELEPHONE NO. _____
(Include Area Code)

REGISTRATION NUMBER 1704

LOCATION OF BUILDING/PREMISE

House Number 7209 Street MAPLE AVE

Town/City TAKOMA PARK MD. Election District _____

Nearest Cross Street _____

Lot 19 Block 3 Subdivision _____

Liber _____ Folio _____ Parcel _____

- 1A. TYPE OF PERMIT ACTION: (circle one)
- | | | | | | | | | |
|------------|-------------------|-----------------------|-----------|---|-----------|---------------|-------|-------------------|
| Construct | <u>Extend/Add</u> | <u>Alter/Renovate</u> | Repair | Circle One: <u>A/C</u> | Slab | Room Addition | | |
| Wreck/Raze | Move | Install | Revocable | Porch <u>Deck</u> | Fireplace | Shed | Solar | Woodburning Stove |
| | | | | Fence/Wall (complete Section 4) Other _____ | | | | |
- 1B. CONSTRUCTION COSTS ESTIMATE \$ 35,000.00
- 1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # _____
- 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY PEPLD
- 1E. IS THIS PROPERTY A HISTORICAL SITE? NO

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

- | | |
|---|---|
| 2A. TYPE OF SEWAGE DISPOSAL | 2B. TYPE OF WATER SUPPLY |
| 01 <input checked="" type="checkbox"/> WSSC | 01 <input checked="" type="checkbox"/> WSSC |
| 02 () Septic | 02 () Well |
| 03 () Other _____ | 03 () Other _____ |

PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL

- 4A. HEIGHT _____ feet _____ inches
- 4B. Indicate whether the fence or retaining wall is to be constructed on one of the following locations:
- On party line/Property line _____
 - Entirely on land of owner _____
 - 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.

John P. Guidera
Signature of owner or authorized agent (agent must have signature notarized on back)

7/11/88
Date

APPROVED X For Chairperson, Historic Preservation Commission

DISAPPROVED _____ Signature Bethi Hahn Date 7/15/88

APPLICATION/PERMIT NO: OM 50-88

DATE FILED: _____

FILING FEE: \$ _____
PERMIT FEE: \$ _____

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:)

THE SCOPE OF PROPOSED WORK IS AS FOLLOWS: DECK AND BAY
EXTENSION OFF KITCHEN AT REAR OF BUILDING, ENCLOSURE
OF EXISTING COVERED SIDE PORCH AT REAR NORTH SIDE OF
BUILDING, PLACEMENT OF SKYLIGHT FOR ATTIC ON MAIN
ROOF AT REAR OF SOUTH FACE OF ROOF. INTERIOR WORK IN-
CLUDES KITCHEN RENOVATION, UPDATE OF BASEMENT, NEW MASTER
BATHROOM. EXTERIOR FINISHES WILL BE MATCHED AS CLOSE
AS POSSIBLE TO ORIGINAL INCLUDING 1/2"X6" CLAPBOARD SIDING,
5" EXTER. CASINGS WITH DRIP, TRADITIONAL (3 PIECE) RAILS AND
MISL. TRIM DETAILS. NEW BAY AREA IS TO ADD NEEDED SPACE TO
LIMITED KITCHEN AREA. PORCH ENCLOSURE IS ALSO TO HELP KITCHEN.
SKYLIGHT IS NEEDED TO PROVIDE LIGHT/VENTILATION TO ATTIC SPACE.

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

FRONT AREAS OF BUILDING CLEARLY VISIBLE FROM STREET ARE
TO BE UNCHANGED AS INDICATED ON ATTACHED PLANS.

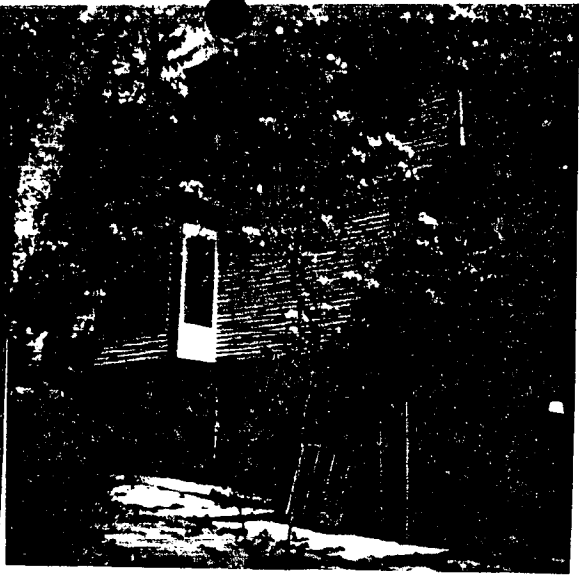
ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed or existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the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

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



72nd Street





MONTGOMERY COUNTY HISTORIC PRESERVATION COMMISSION

LOCAL ADVISORY COMMITTEE REVIEW FORM

EXTERIOR ALTERATIONS

I. Location of property

- a. Located within the Takoma Park historic district.
- b. This is a Master Plan/Atlas historic district (circle one).
- c. Address of Property: 7209 Maple Avenue
Takoma Park
- d. Property owner's name, address and phone number:

Guild Development Associates
233 EAST REDWOOD ST.
#302 GARRETT BLDG.
BALTO, MD 21202 (h) (w) PHONE# 301-685-8588

- e. Is this property a contributing resource within the historic district? Yes No .
- f. On a map of the district locate this property and any adjacent historic resources. Will this work impact other contributing historic resources? Yes No .

II. Description of work proposed.

- a. Briefly describe proposed work:

Add small clapboard addition with deck to rear of c. 1880s, 2 story frame house; add skylights to rear-side of existing structure; remove 1 window from ~~each~~ side of the second story of the existing house. Remove porch on south elevation.
Enclose

- b. Is this work on the front, rear, or side of the structure?

rear and sides

- c. Is the work visible from the street?

yes

- d. What are the materials to be used?

- e. Are these materials compatible with existing materials? How? If not, why?

yes

III. Recommendations 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?

Criteria 2 - work is compatible with the house and district.

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)

~~suggestion of Committee not skylight on~~

b. Disapproval of Work

1. 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: 06-21-88

Date of LAC meeting at which application was reviewed: 06-21-88

Form completed by: Douglas A. Dunn

Title: Member of LAC

Member of: Takoma Park Local Advisory Committee

Date: 07-12-88