



City of Cambridge

PLANNING AND ZONING

1025 WASHINGTON STREET
CAMBRIDGE, MARYLAND 21613
TELEPHONE: 410-228-1955
FAX: 410-228-1474
MD RELAY (V/TTY) 7-1-1 or 1-800-735-2258

HPC - CoA#	2021-007
ARC #	
EAR #	

Application to the Historic Preservation Commission

Check the Appropriate Requested Action:

Informal Review

- o Discuss with Staff and the Commission preliminary design ideas for a project. The Commission will address the appropriateness of the proposal and provide guidance.

Administrative Review Certificate (ARC)

- o Meet with staff to discuss projects eligible for administrative review, such as in-kind replacement of deteriorated features, minor work not impacting the architectural character, or repairs and in-kind restorations etc. (see attached Minor Work Items Chart attached)

Emergency Approval Review (EAR)

- o Meet with staff to qualify the level of emergency of the repairs and replacements
- o One or more Commissioner will confirm (site visit may be required) in addition to Staff

Formal Review- (Certificate of Appropriateness / HPC-CoA)

- o Requires a full review by the Historic Preservation Commission
- o Typical projects that apply (please check relevant sections below)
 - Construction of any new buildings, additions, or accessory structures
 - Exterior Building Alteration (facades, roof, porches, entrance stoops...)
 - Signage or Graphics
 - Landscaping/Fencing/Patios/Paving
 - Demolition/Moving a Structure/Removal of a character defining feature
 - Other:

Consent Agenda – Application is presented at HPC meeting; if Commissioners have questions, it becomes a full HPC review, otherwise it is voted upon without discussion

Note: Please refer to Administrative / Minor Works Item chart attached for details on HPC-CoA requirements

PROPERTY INFORMATION:

611 Locust Street, Cambridge, MD 21613

Street Address	City	State	Zip Code
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Map/Parcel Number	Current Zoning	Year Built
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APPLICANT INFORMATION:

Name

Kathlyne Rog

Street Address City State Zip Code

611 Locust Street, Cambridge, MD 21613

E-Mail Address

KathlyneRog@hotmail.com

Phone Number

202-281-8964

PROPERTY (LAND) OWNER: (IF DIFFERENT THAN APPLICANT)

Name

Street Address

City

State

Zip Code

E-Mail Address

Phone Number

Fax Number

CONTRACTOR/ARCHITECT (if applicable)

Name

Anderson Fence Company, Inc.

Address

30200 Rehobeth Road, Marion, MD 21838-2214

Daytime phone number

Easton 410-822-4402

Email address

Jake@andersonfence.net

Jacob Grant www.andersonfence.net Cell: 443-754-7074 Office: 410-749-2944

Please indicate below which sides of the building are impacted and provide documentation as applicable:

- € Main street front façade
- € Side yard facades
- € Rear façade and rear side of house
- € Outbuildings

Please use the table below to indicate the existing elements that will be affected by the project.

	Existing Materials	
Foundations & Masonry		Quantity :
Exterior Wall / Finish		
Porch / Floor, Elements, Details ...		
Entrance Steps		
Windows & Doors / type & style		
Ornamental Elements (brackets ...)		
Roof & Dormers		
Chimney(s)		
Walkway & Driveway		
Built Landscaping Features		
Fences		
Signage		
Handicapped accessibility		
Solar Panels		
Exterior lighting		

Scope of Work: Describe the proposed project *in detail*, including all changes to the building, site, or lot. Include all features to be removed, replaced, altered, repaired, and/or added. Attach more sheets to provide all drawings and to describe all proposed, elements, materials and their specifications.

Backyard fence (see attached)

Please complete the following checklist of required elements to complete your application.

Attachments Checklist: In order to ensure completeness of your application, please complete the following checklist of required documentation. *Any application without the necessary documentation and deemed incomplete by staff will not be accepted nor presented at the HPC hearing.*

Required Documentation:

For All Applications (HPC-CoA, ARC and EAR):

___ **Completed/ signed application form**

___ **“Before” photos** of existing conditions, should show the entire site, plan and elevation where the work is to be completed.

___ **“After” photos/drawings/renderings;** should indicate what the property will look like after proposed work is completed.

___ **Specifications** and/or materials brochures describing in detail the manufacture, material, proportions and details of all new proposed elements of repair, replacement or new construction

For New Construction, Addition or Demolition

___ **Site plan, to scale.** A site plan should include: property lines, lot dimensions, fence location, fence length and height, existing structure(s), existing or proposed porches, decks and outbuildings, right-of-way or access easements on the property (even if not in use), distance from property lines, and location of surrounding roads.

___ **Floor Plans** (showing existing conditions, demolition and new construction)

___ **Dimensioned elevation drawings** of all sides affected (including any demolition & new construction)

___ **Construction Details** (including all materials specifications, ornamental elements, special features)

For Fences, Porches and Site Improvements (decks, garages, sheds, pergolas)

___ **Site plan, to scale.** A site plan should include: property lines, lot dimensions, fence location, fence length and height, existing structure(s), existing or proposed porches, decks and outbuildings, right-of-way or access easements on the property (even if not in use), distance from property lines, and location of surrounding roads.

___ **Drawings/photographs** of proposed alteration and modifications to site

___ **Material specifications** including picture or product brochure of proposed product, as well as specification sheet for construction materials and pre-fabricated elements

Solar Panels

___ **Roof plan, to scale,** showing the location of all panels on the roof

___ **Elevations** of locations with solar panels

___ **Photos** of “before”, and if possible “after” conditions viewed from street level or rights-of-way

Signage

___ Dimensioned drawing/rendering of proposed sign and placement on the building

___ Photos of streetscape, including surrounding signage if applicable.

Modifications to mature trees and significant natural landscape features

___ Photos of existing conditions as they relate to the streetscape

XX I have reviewed, and I understand the applicable HPC guidelines for my project.

Applicant/Owner Signature

Date

/s/ Kathlyne Rog
July 6, 2020

OFFICE USE ONLY

Date Received: _____ Taken By: _____ Receipt #: _____ HPC Application #: _____

Documents provided: 1 original _____ Meeting Date: _____

Filing Fees-Residential _____ \$50.00 Commercial & Non-Residential _____ \$100.

Administrative Review _____ (No charge) Request for Extension : _____ (No charge if filed before expiration date).

Note: Make Checks Payable to the City of Cambridge.

Fence Quote

Jacob Grant <jake@andersonfence.net>

Thu 7/2/2020 5:13 PM

To: kathlynerog@hotmail.com <kathlynerog@hotmail.com>

📎 1 attachments (94 KB)

KathyRog.pdf;

Here is your quote and drawing for the 6' Caroline fence. Feel free to call me with any changes and let me know when your ready so I can get you on the schedule. Thanks, Jacob

Jacob Grant

443-754-7074

Jake@AndersonFence.Net

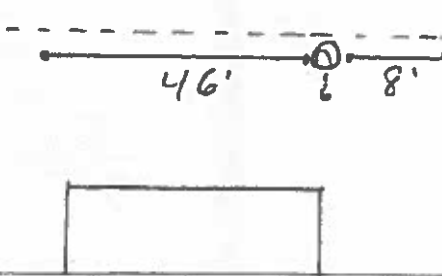


PROPOSAL SUBMITTED TO: Kathy Lynn Reeg
 STREET: 611 Locust Street
 CITY, STATE, ZIP: Cambridge md 21613
 JOB NAME: _____
 JOB LOCATION: _____

ANDERSON FENCE COMPANY, INC.
 30200 Rebooth Road • Marion, MD 21838 2214
 Marion: 410-823-3661 • Salisbury: 410-749-2944
 Eastern: 410-823-4403 • Dover: 302-734-3061
 Toll Free: 800-722-0929 • FAX: 410-623-3063

ATTN: Kathy DATE: 6-21-20
 PHONE: 202-281-8964 PHONE: _____
 FAX: _____ CUST ORDER NO: _____

TYPE I FENCE		CHAIN LINK	QUANTITY	MATERIAL
STYLE				TYPE I FENCE
TOTAL HEIGHT	BARB WIRE			END OR GATE POSTS 2" 2 1/2" 3" 4" 6"
FABRIC				END OR GATE POSTS 2 1/2" 3" 4" 6" 8"
LINE POSTS				END OR GATE POSTS 2 1/2" 3" 4" 6" 8"
TOP RAIL				CORNER POSTS 2" 2 1/2" 3"
GATE FRAME				CONNECTIONS 2" 2 1/2" 3" 4" 6"
				BRACES
TYPE II FENCE				_____ FT WIDE SINGLE SWING GATES
STYLE				_____ FT WIDE DOUBLE SLIDE GATES
MATERIAL				_____ FT WIDE SINGLE SWING GATES
TOTAL HEIGHT		BARB WIRE		DOUBLE SLIDE
COVER				TYPE II FENCE
LINE POSTS				END OR GATE POSTS
RAILS				END OR GATE POSTS
GATE FRAME				CORNER POSTS
POST TOP STYLE				_____ FT WIDE SINGLE SWING GATES
				_____ FT WIDE DOUBLE SLIDE GATES
TYPE III FENCE		WOOD <u>VENTIL</u>		TYPE III FENCE
STYLE		<u>Candiane</u> HEIGHT: <u>6</u>		LINE POSTS
FACE MATERIAL: <u>PVC</u>	FACE SIZE: <u>3/4" x 6"</u>			END OR GATE POSTS
BOARD SPACING: _____	TOP STYLE: <u>FLAT</u>			END OR GATE POSTS
RAIL MATERIAL: <u>PVC</u>	RAIL SIZE: <u>1/2" x 5/8"</u>	NO OF RAILS: <u>2</u>	CORNER POSTS	
POST MATERIAL: <u>PVC</u>	POST SPACING: <u>8</u>	LINE POST SIZE: <u>5x5</u>		
POST TOP STYLE				_____ FT WIDE SINGLE SWING GATES
				_____ FT WIDE DOUBLE SLIDE GATES

DRAWING: 

REMARKS:
 - All posts Set in Concrete
 - 1/3 Deposit Down
 - Customer responsible for permit

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of Three thousand & thirty nine dollars, (\$ 3039)

TERMS: DUE UPON COMPLETION. INVOICES UNPAID AFTER 10 DAYS ARE SUBJECT TO 1% CARRYING CHARGE PER MONTH WHICH IS AN ANNUAL RATE OF 12%.

The Conditions on the Reverse Side of This Sheet Are Made a Part of This Contract.

Authorized Signature: [Signature] Jacob Grant

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Date of Acceptance: _____, 20____

Signature [Signature] Signature _____



6' VINYL FENCE FOR 611 LOCUST



Building Permit

Office of the Building Official

Department of Public Works

1025 Washington Street
Cambridge, Maryland 21613
Telephone: 410-228-1955
Fax: 410-228-1474

Cost of Improvements: \$3039
Permit Fee: _____
Remarks: _____

Owners Name: KATHYNE ROG
Owner Mailing Address: 611 LOCUST STREET
CAMBRIDGE, MD 21613

Location of Project: 611 Locust St.
Historic District? YES NO

Owners Telephone #: 202-281-3910
Permit For: REAR FENCE

Certificate of Appropriateness Approved? N/A Date: _____

Contractors Name: ANDERSON FENCE COMPANY INC
Cont. Mailing Address: 30200 REHOBETH ROAD
MARION, MD 21838

Date of Application: 7-6-2020

EXPIRES:

Cont. Telephone #: 443-754-7074

Date of Approval: _____

Cont. M.H.I.C. #: _____

Zoned? _____ Flood Plain Zone _____

Description of Project: 54 feet across back yard

Applicant Submitted? Site Plan Drawings Spec. Sheet Seals Affixed? YES NO N/A
Loading Permit Issued? YES NO N/A Public Works Agreement Executed? YES NO N/A
Sediment and Erosion Control Approved? YES NO N/A Forest Conservation Approved? YES NO N/A

NOTES:

1. No building shall be occupied until final inspection is made and a certificate of occupancy, if required, is issued by the building inspector.
2. This permit expires six (6) months from the date approved.
3. Any development or improvements may require a wetlands permit from the U.S. Army Corps of Engineers and/or the State of Maryland.
4. The work described in this permit may invoke requirements of local and/or State Forest Conservation Programs, Critical Area and/or floodplain ordinances and/or Floodplain development programs.
5. Plan review and approval by the Dorchester County Health Department and the State Fire Marshal's office, as well as inspection of electrical work by a certified inspection agency, may also be required to determine compliance with County and State codes.
6. Stormwater management plan must be approved prior to permitting when applicable.
7. It is the applicants responsibility to ascertain availability of utilities to the subject property(ies). All costs to extend utilities to the property shall be borne by the applicant unless prior agreements have been made between the applicant and the City.

The undersigned, as owner (building contractor and/or agent for the owner) of the proposed construction hereby applies for permission to perform said construction in accordance with the provisions of Chapter 4 of the Code of Laws of the City of Cambridge, and authorizes inspection of the property as necessary to determine compliance with said Code.

The applicant hereby swears or affirms under penalty or perjury that the information given is true and correct to the best of his/her knowledge and belief, and that he/she will bring to the attention of the Office of the Building Official any change or divergence thereof.

KATHYNE ROG
Applicant

[Signature]
Applicant Signature

Permission is hereby granted to the above applicant to perform the work herein described in accordance with the submitted plans and specifications and in accordance with Chapter 4 of the City of Cambridge Code of Laws.

Building Official

RECEIPT # _____

PERMIT # _____