

Scala, Mary Joy

From: Scala, Mary Joy
Sent: Tuesday, June 16, 2015 12:03 PM
To: Katie Kellett (Ktkellett@gmail.com)
Cc: 'Ruth Ellen Outlaw'; Richard Hazard
Subject: 604 Locust Avenue.

I have received emails from a sufficient number of BAR members that I can approve your application administratively. Therefore, you may consider your application for a rear addition approved.
Thank you for your cooperation.

Mary Joy Scala, AICP
Preservation and Design Planner
City of Charlottesville
Department of Neighborhood Development Services
City Hall – 610 East Market Street
P.O. Box 911
Charlottesville, VA 22902
Ph 434.970.3130 FAX 434.970.3359
scala@charlottesville.org



Board of Architectural Review (BAR)

Conservation District - Certificate of Appropriateness

Please Return To: City of Charlottesville
Department of Neighborhood Development Services
P.O. Box 911, City Hall
Charlottesville, Virginia 22902
Telephone (434) 970-3130 Fax (434) 970-3359

Please submit ten (10) copies of application form and all attachments.

For a new construction project, please include \$375 application fee. For all other projects requiring BAR approval, please include \$125 application fee. For projects that require only administrative approval, please include \$100 administrative fee. Make checks payable to the City of Charlottesville.

The BAR meets the third Tuesday of the month.

Deadline for submittals is Tuesday 3 weeks prior to next BAR meeting by 3:30 p.m.

Project Name/Description 604 Locust Ave Addition Parcel Number _____
Address/Location 604 Locust Ave, Charlottesville VA
Owner Name Catherine Kelleff Applicant Name Catherine Kelleff

Applicant Information

Address: 604 Locust Ave
Charlottesville VA 22902
Email: ktkelleff@gmail.com
Phone: (W) 817 2430 (H) 979 4557
FAX: _____

Property Owner Information (if not applicant)

Address: same as above
Email: _____
Phone: (W) _____ (H) _____
FAX: _____

Do you intend to apply for Federal or State Tax Credits for this project? no

Signature of Applicant

I hereby attest that the information I have provided is, to the best of my knowledge, correct. (Signature also denotes commitment to pay invoice for required mail notices.)

Catherine A. Kelleff 6/12/15
Signature Date

Catherine A Kelleff 6/12/15
Print Name Date

Property Owner Permission (if not applicant)

I have read this application and hereby give my consent to its submission.

Signature _____ Date _____

Print Name _____ Date _____

Description of Proposed Work (attach separate narrative if necessary): addition to and renovation of SF home at 604 Locust Ave. Submissions from builder & architect have additional information.

List All Attachments (see reverse side for submittal requirements):

For Office Use Only

Received by: _____

Fee paid: _____ Cash/Ck. # _____

Date Received: _____

Approved/Disapproved by: MJ Seal

Date: 6/16/2015

Conditions of approval: _____

CITY OF CHARLOTTESVILLE
"A World Class City"

Department of Neighborhood Development Services

City Hall Post Office Box 911
Charlottesville, Virginia 22902
Telephone 434-970-3182
Fax 434-970-3359
www.charlottesville.org



June 1, 2015

Catherine A Kellett, Trustee
604 Locust Avenue
Charlottesville, VA 22902

RE: 604 Locust Avenue

Dear Property Owner,

It has come to my attention that the building permit for your recent addition was issued without the required review by the Board of Architectural Review. 604 Locust Avenue is in the Martha Jefferson historic conservation district, which requires BAR approval of a certificate of appropriateness for:

- (1) Additions located on a corner lot.
- (2) Additions located wholly or partially to the side or front of an existing building.
- (3) Additions that are equal to or greater than fifty (50) percent of the total gross floor area of the existing building.
- (4) Additions located to the rear that exceed the height or width of the existing building or structure.

For some reason the building permit was issued without proper review. However, the BAR has asked to review the application. Please complete the attached application form, and submit with one digital set of plans. The City will waive the application fee. I plan to circulate the digital application and will let you know if the BAR wants to discuss at their regular meeting.

If you have questions, please do not hesitate to contact me at 434-970-3130 or scala@charlottesville.org

Sincerely yours,

Mary Joy Scala, AICP
Preservation and Design Planner

Cc:
Ruth Outlaw
Rick Hazard





KELLETT
ADDITION & RENOVATION

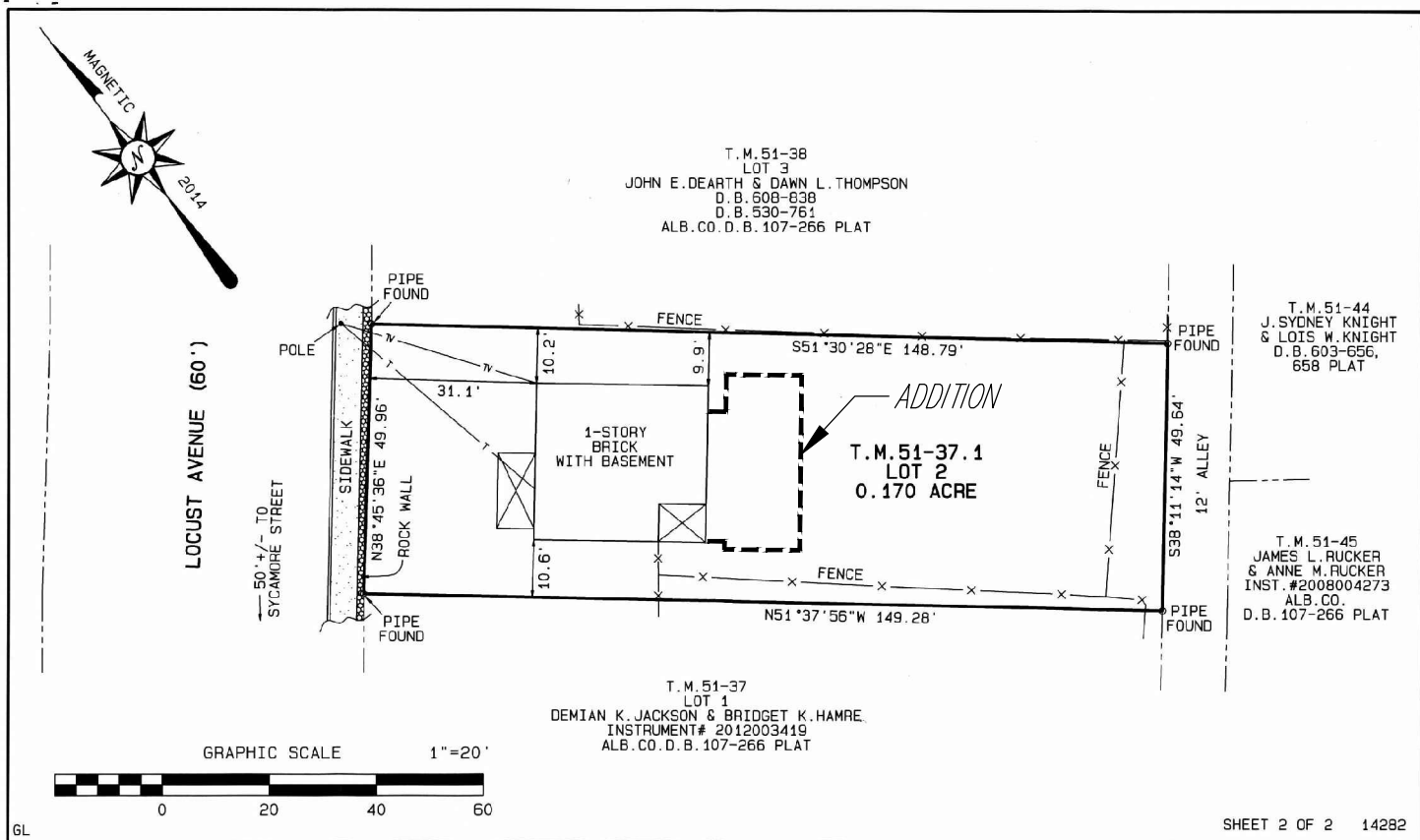
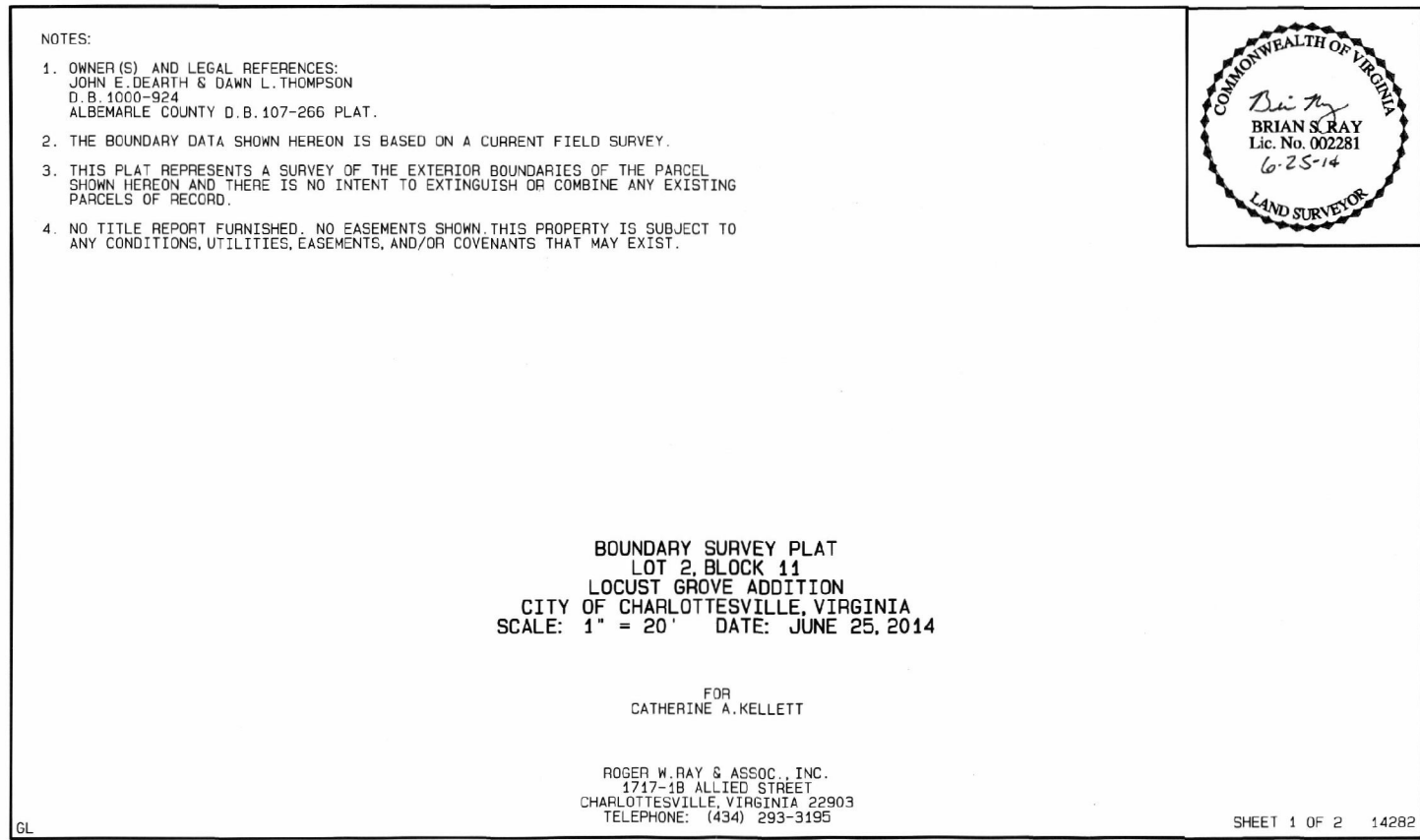


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- GENERAL NOTES
1. COMPLY WITH ALL APPLICABLE CODES AND ORDINANCES.
 2. VERIFY GRADES AND ELEVATIONS SHOWN ON DRAWINGS.
 3. ANY DISCREPANCIES IN ELEVATIONS OR DIMENSIONS SHALL BE REPORTED TO DESIGNER.
 4. DO NOT SCALE DRAWINGS.
 5. VERIFY AND PROVIDE ALL ROUGH-IN DIMENSIONS FOR EQUIPMENT PROVIDED IN THE CONTRACT.
 6. REPETITIVE FEATURES MAY BE DRAWN ONLY ONCE AND SHALL BE COMPLETELY PROVIDED AS IF DRAWN IN FULL.
 7. DIMENSIONS ARE TO FACE OF SHEET ROCK ON EXISTING WALLS, FACE OF MASONRY, FACE OF SHEATHING, FACE OF STUD, CENTER OF OPENING, CENTER OF BEAM, CENTER OF COLUMN AND CENTER OF FIXTURE
 8. INTERIOR PARTITIONS ARE 3 1/2" UNLESS OTHERWISE DIMENSIONED. EXTERIOR WALLS ARE 2x4's.

ABBREVIATIONS			
A.F.F.	ABOVE FINISH FLOOR	GALV.	GALVANIZED
ALUM.	ALUMINUM	GYP. BD.	GYPSUM BOARD
BD.	BOARD	HD	HEAD
BM.	BEAM	INSUL	INSULATION
BLDG.	BUILDING	INT.	INTERIOR
C.O.	CASED OPENING	JST.	JOIST
CAB.	CABINETRY	K.S.	KNEE SPACE
CER.	CERAMIC	L.T.	LIGHT
CLG.	CEILING	MAS.	MASONRY
CLR.	CLEAR	MNT.	MOUNT
COL.	COLUMN	N.I.C.	NOT IN CONTRACT
CONFG.	CONFIGURATION	P.T.	PRESSURE TREATED
CRS.	COURSE	PLYWD.	PLYWOOD
D	DRYER	PNT.	PAINT
DET.	DETERMINED	R.	RISER
DIMS.	DIMENSIONS	R.I.	ROUGH-IN
D.S.	DOWNSPOUT	REF.	REFRIGERATOR
DW	DISHWASHER	REG.	REGISTER
DWG.	DRAWING	REQ'D	REQUIRED
EA.	EACH	RET.	RETURN
ELEV.	ELEVATION	SID'G	SIDING
EQ.	EQUAL	T.	TREAD
EXNT.	EXTENT	T & G	TONGUE AND GROOVE
EXT.	EXTERIOR	TYP.	TYPICAL
F.F.	FINISH FLOOR	U.O.N	UNLESS OTHERWISE NOTED
F.P.	FIREPLACE	UTIL.	UTILITY
FL.	FLOOR	V.I.F.	VERIFY IN FIELD
FIN.	FINISH	W	WASHER
FXTR.	FIXTURE	W/	WITH
FOUND.	FOUNDATION	WD.	WOOD
FTG.	FOOTING.		

KELLETT

JOB

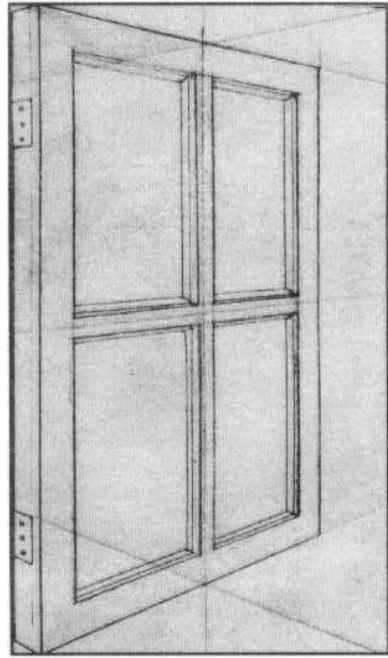
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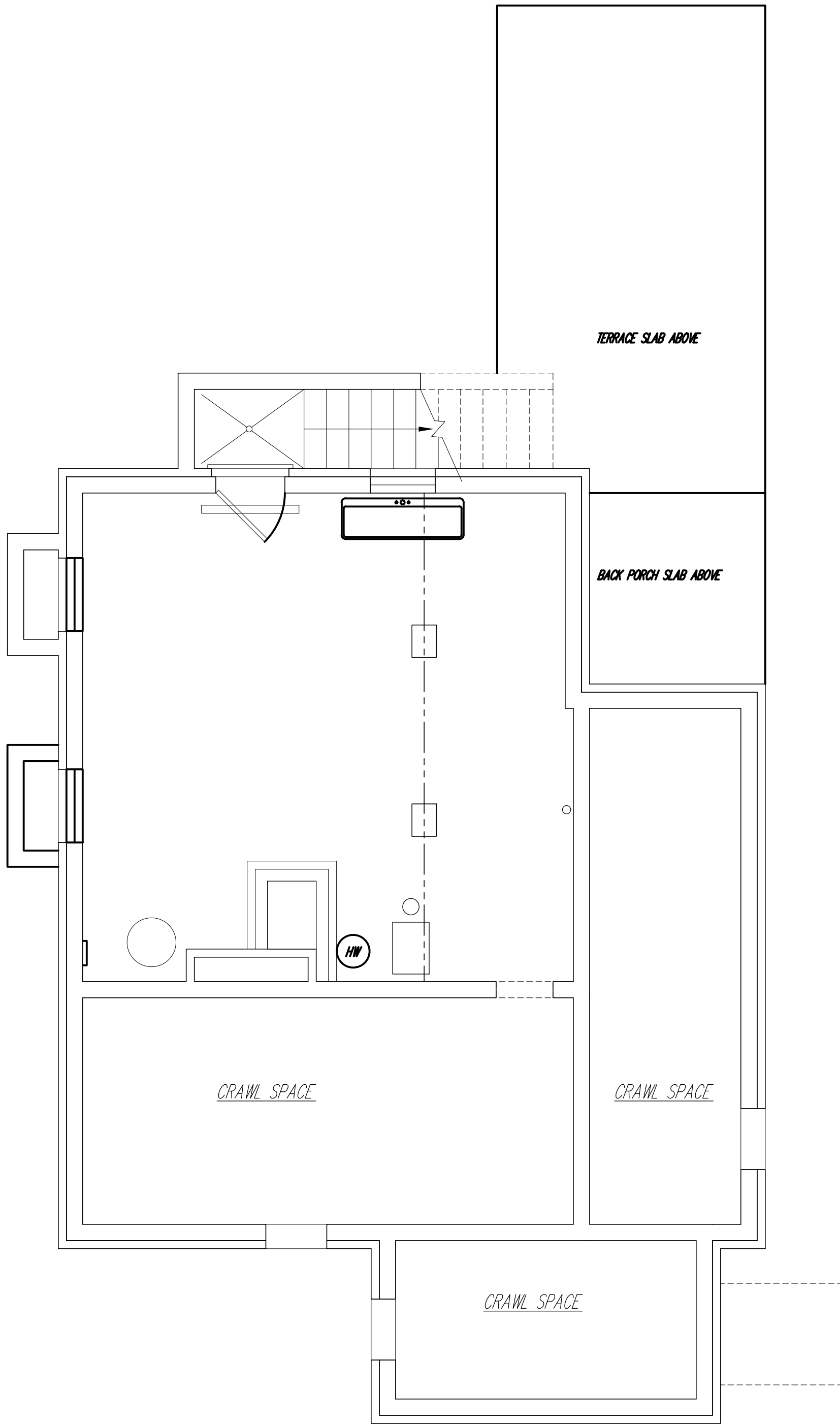
DRAWING COVER SHEET

9 7 1 9 9 1 4

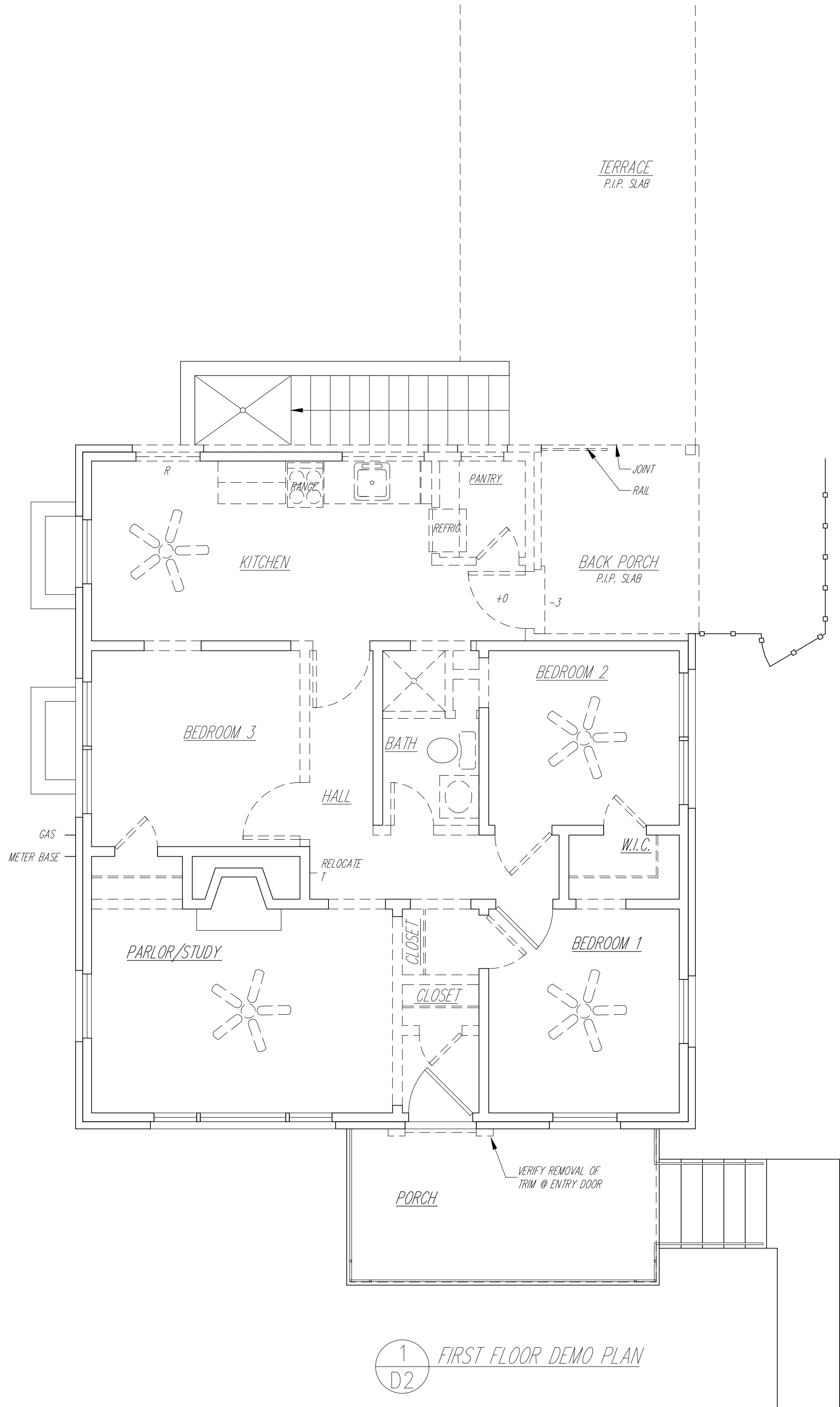
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OUTLAW
DESIGN



1
D1 BASEMENT DEMO PLAN



1
D2 FIRST FLOOR DEMO PLAN

D1

DATE 02-09-2015

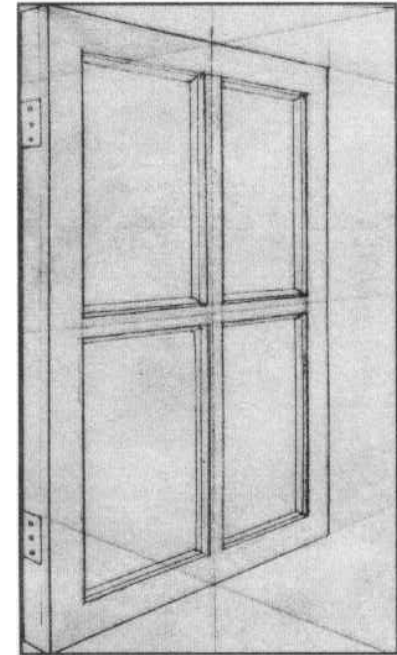
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DRAWING DEMOLITION PLANS

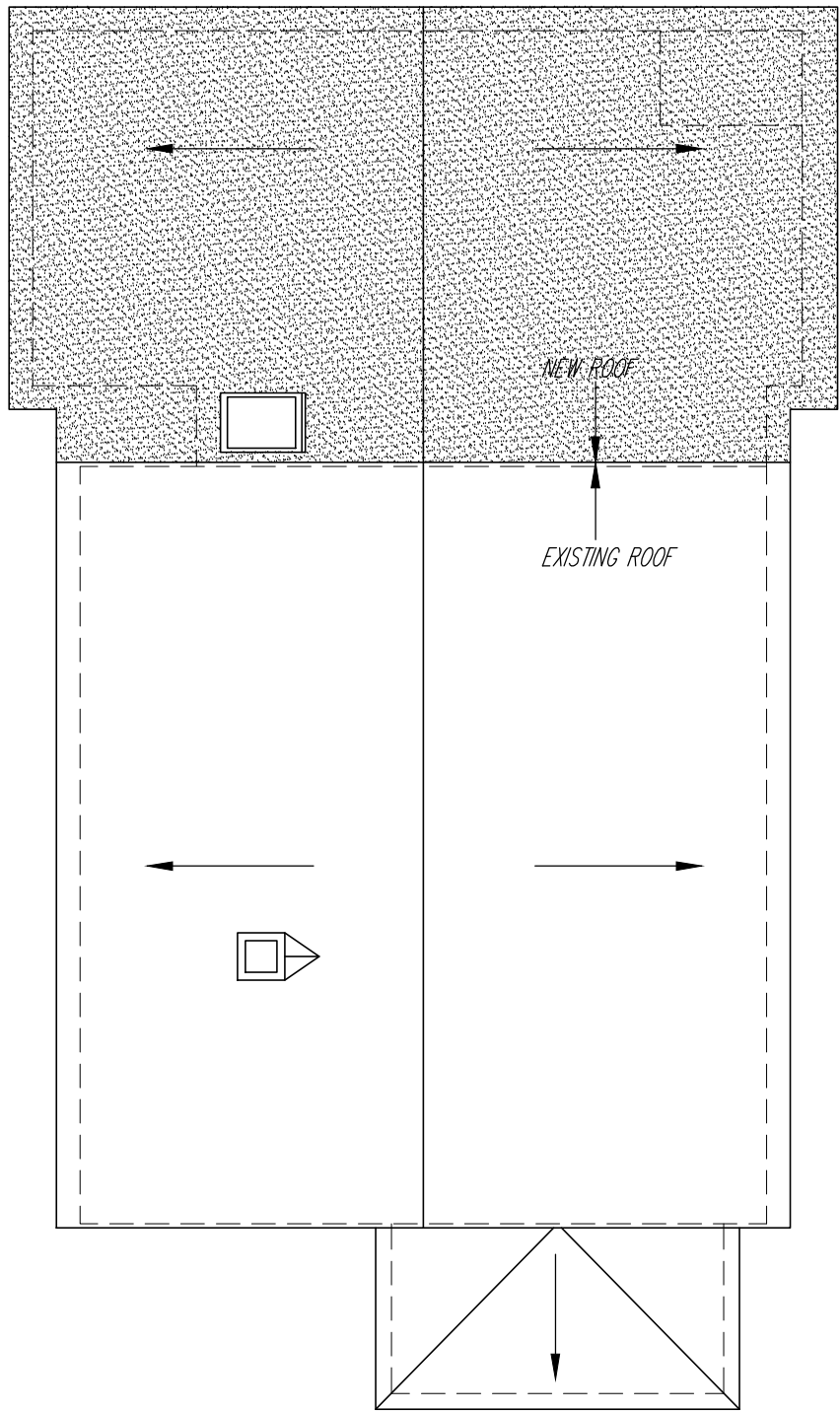
JOB KELLETT

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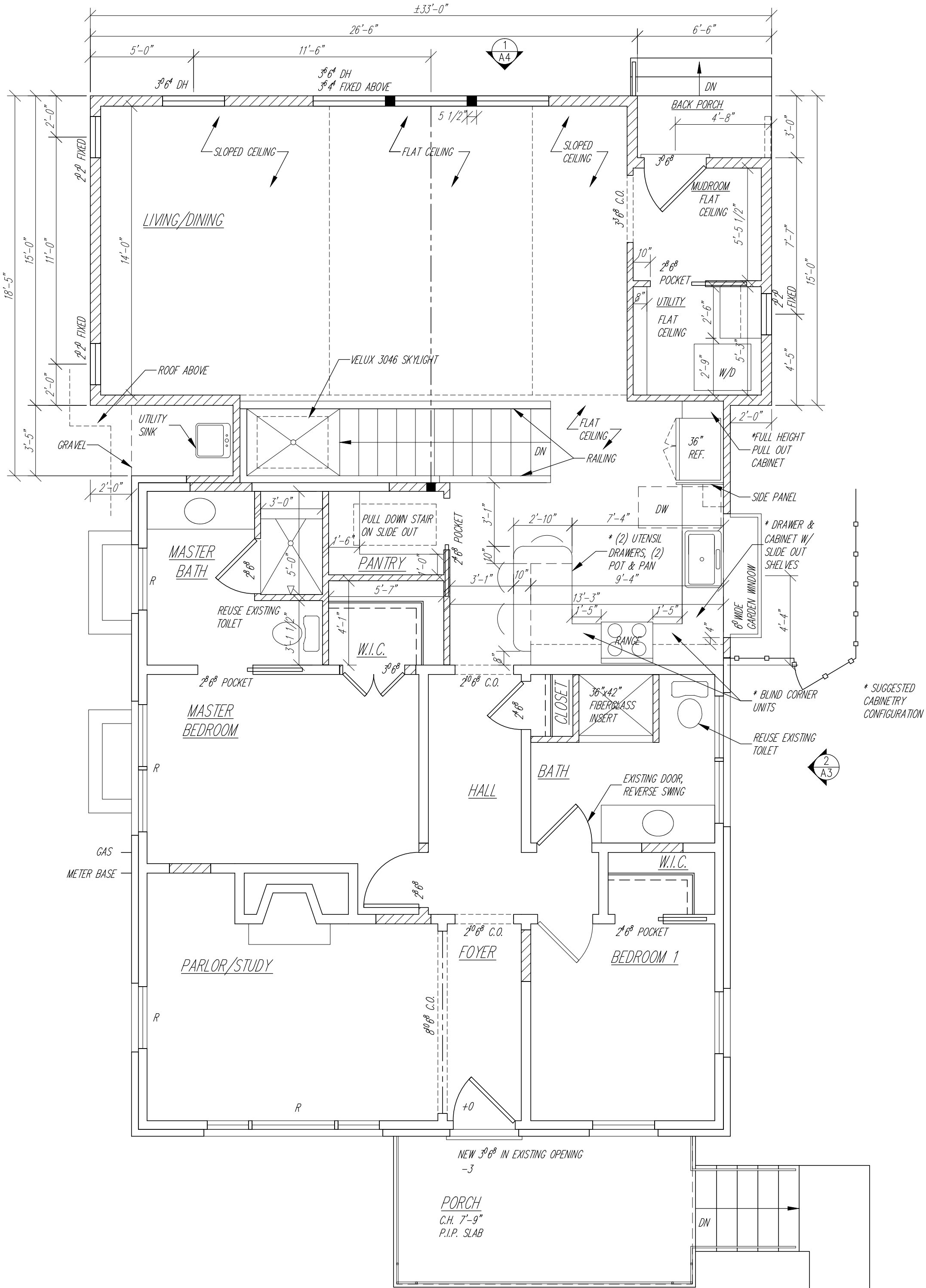
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2 ROOF PLAN
A2 SCALE 1/8" = 1' - 0"



PLAN NORTH

1 FIRST FLOOR PLAN
A2

A2

DATE 02-09-2015

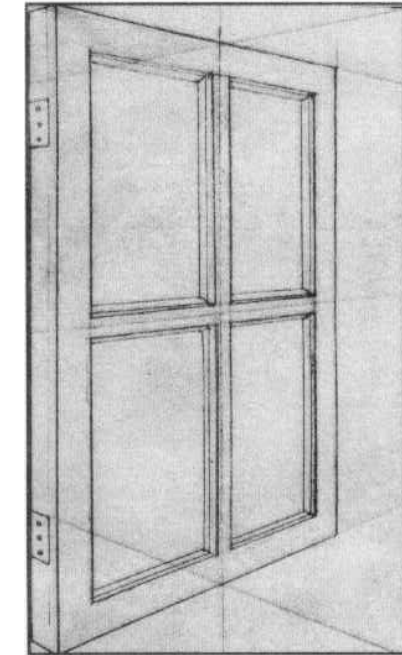
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DRAWING FIRST FLOOR & ROOF PLANS

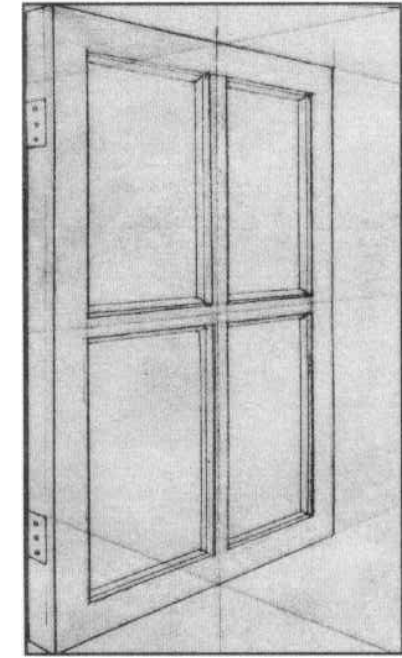
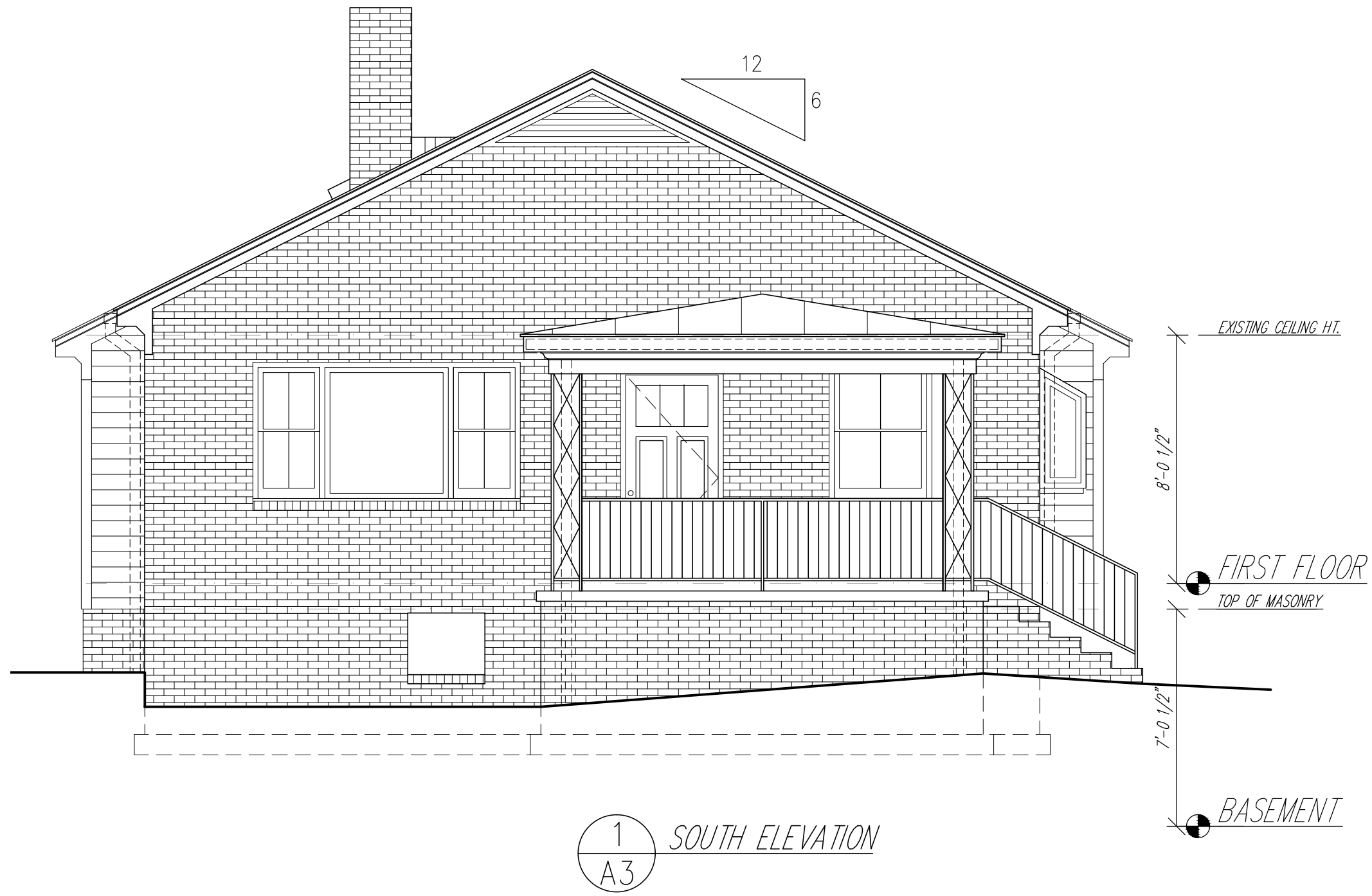
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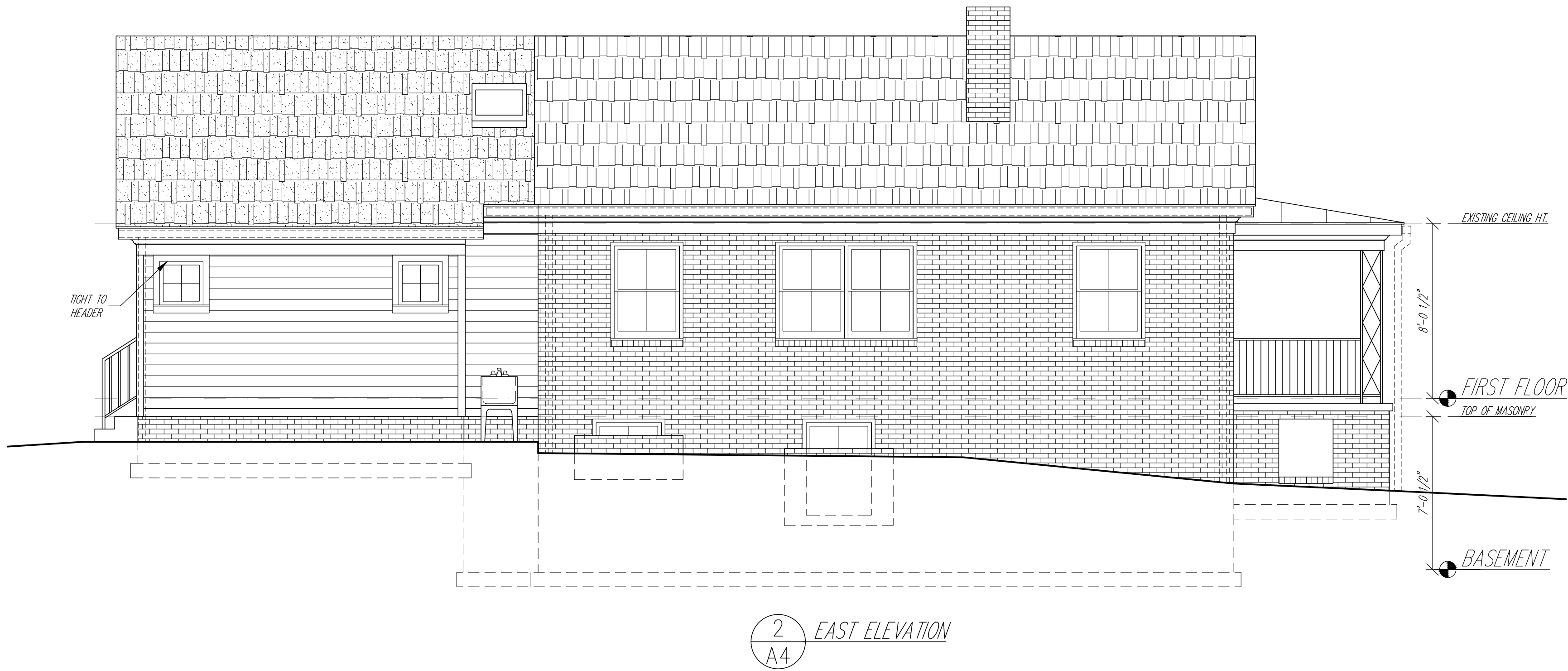
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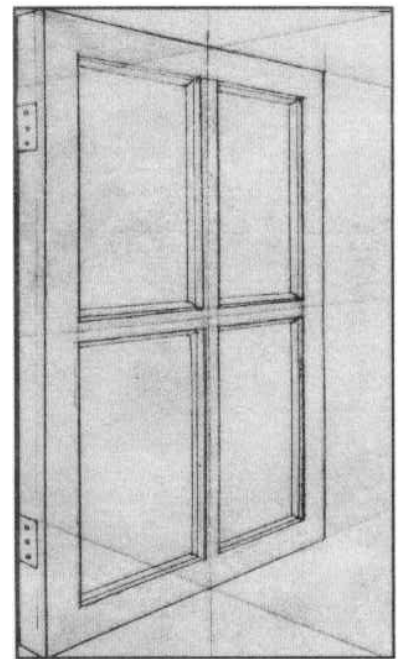
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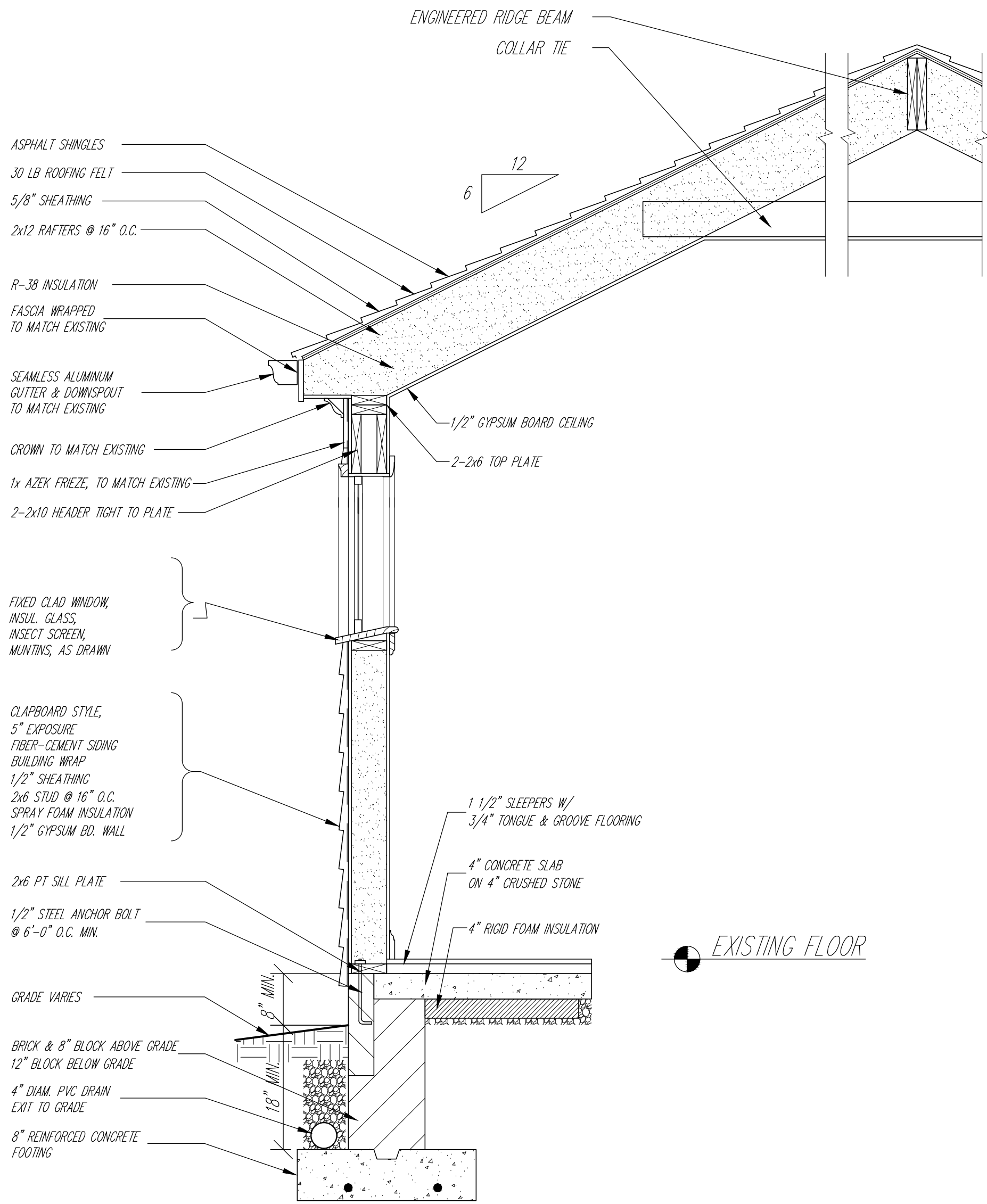
DRAWING
EXTERIOR ELEVATIONS

SCALE
1/4"=1'-0"

DATE
02-09-2015

A4

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1
A5
TYPICAL WALL SECTION

JOB

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DATE

02-09-2015

SCALE

3/4"=1'-0"

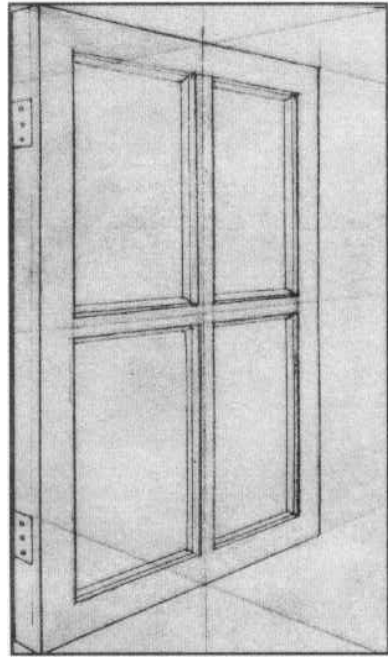
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WALL SECTION

9 7 1

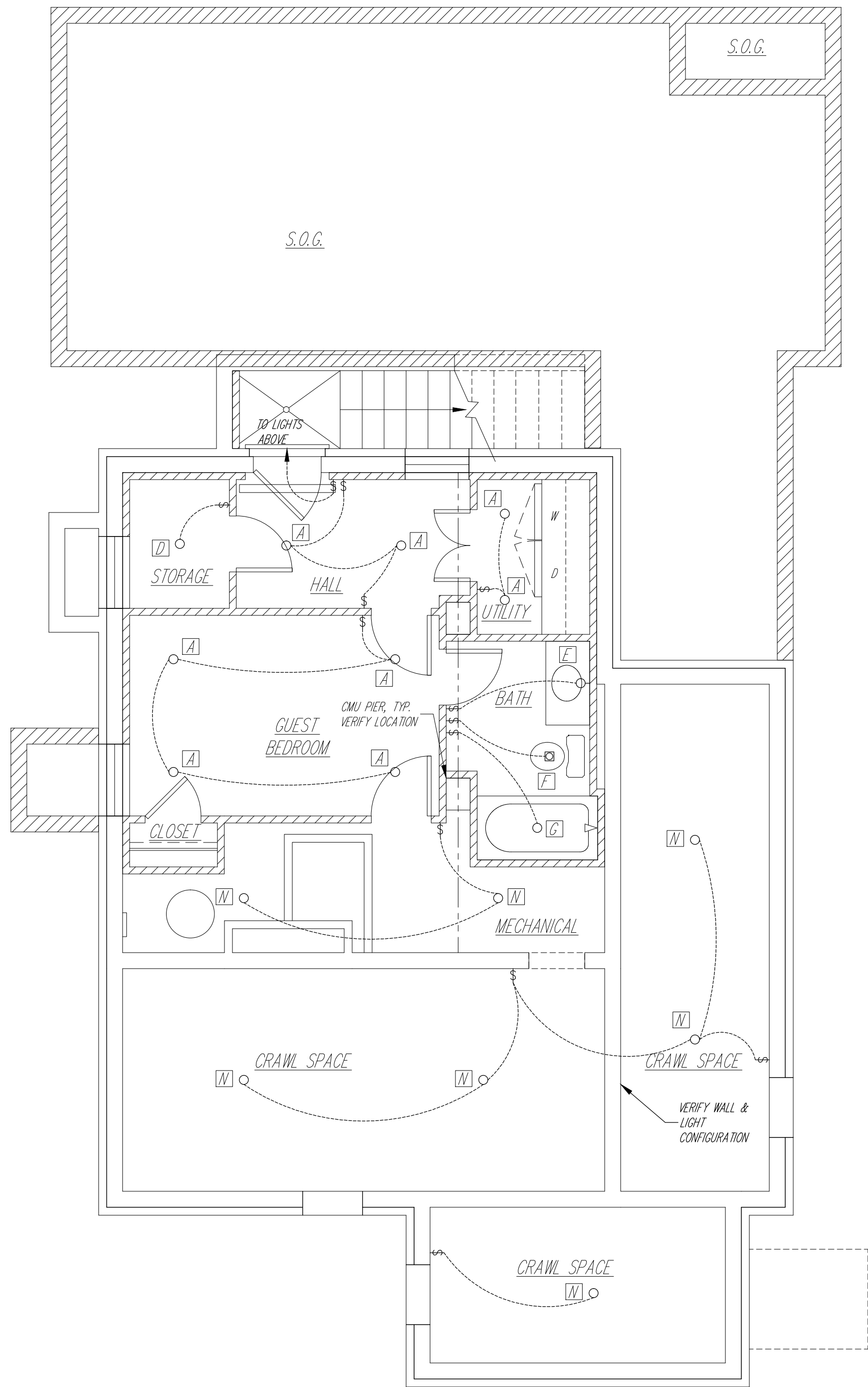
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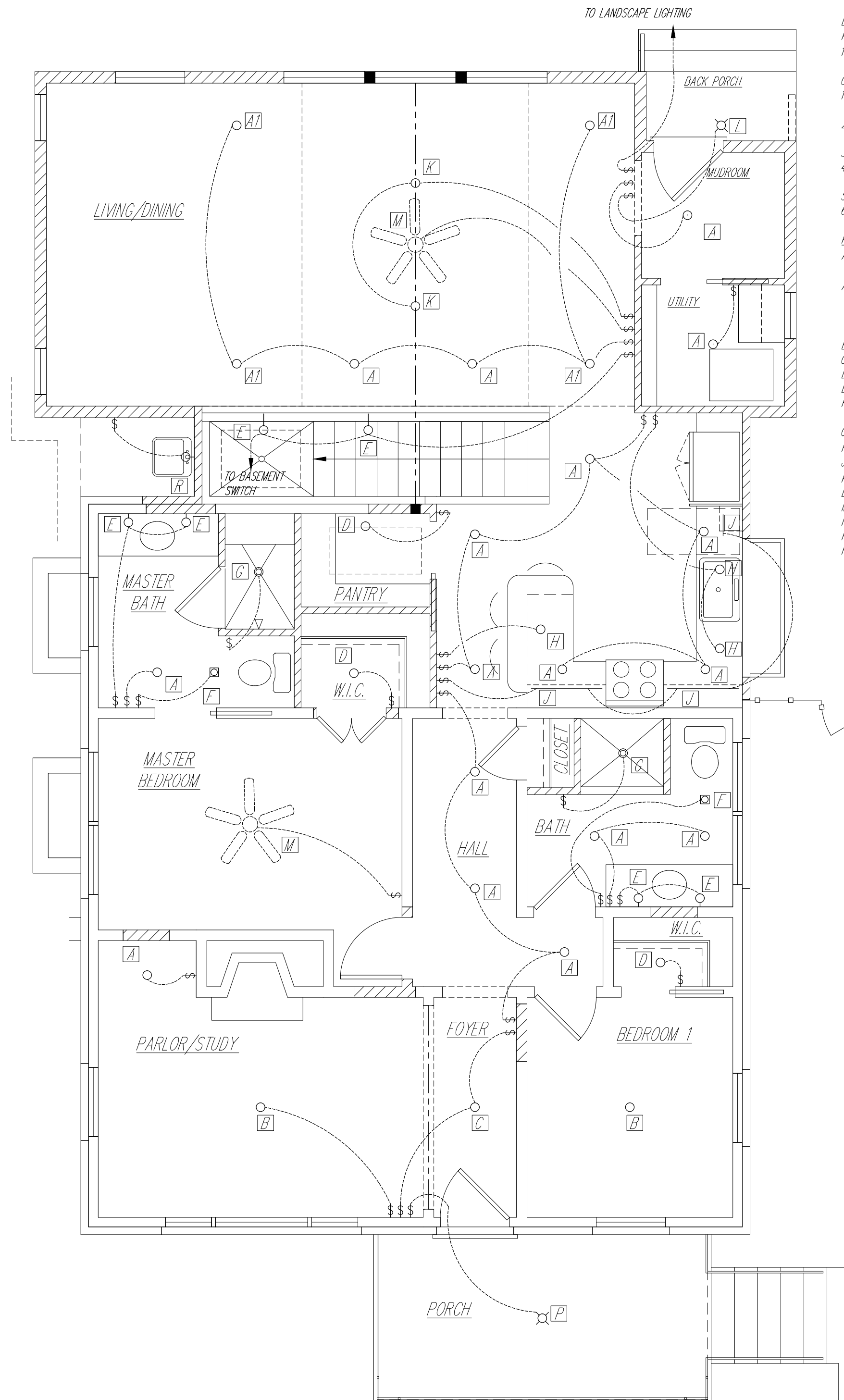


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1 BASEMENT ELECTRICAL PLAN FOR FUTURE WORK
E1



2 FIRST FLOOR ELECTRICAL PLAN
E1

LIGHTING SCHEDULE
KELLETT
11-10-2014, REV. (10-31-2014)

- GENERAL NOTES
1. CENTER LIGHTS BETWEEN OR ON WINDOWS UNLESS OTHERWISE INDICATED.
 2. ASSUME LIGHTS ARE TO BE ALIGNED IF THEY ALIGN GRAPHICALLY.
 3. VERIFY TRANSFORMER LOCATIONS.
 4. WHEN INSTALLING FIXTURES, APPROXIMATE LOCATIONS AS JOISTS WILL ALLOW.
 5. VERIFY SWITCH LOCATIONS ON SITE WITH OWNER.
 6. OUTLETS TO CODE U.O.N.

KEY	#	DESCRIPTION
A	25	5/1/2" RECESSED DOWNLIGHT W/ WHITE BAFFLE REF.
A1	4	5/1/2" RECESSED DOWNLIGHT W/ WHITE BAFFLE REF. FOR SLOPED CEILING (SOME SLOPED & INSULATED)
B	2	REPLACE EXISTING
C	1	CLOSE TO CEILING
D	4	CLOSET LIGHT
E	7	DECORATIVE WALL MOUNTED
F	3	BATHROOM VENT FAN "NO LIGHT", LOW SONE
G	3	WET LOCATION, RECESSED
H	3	DECORATIVE PENDANT (MEDIUM)
J	3	UNDER CABINET LIGHT
K	1	DECORATIVE PENDANT (LARGE)
L	1	WET LOCATION, PENDANT
M	2	CEILING FAN, NO LIGHT
N	7	UTILITY
P	1	REPLACE EXISTING, PORCH
R	1	WET LOCATION, WALL MOUNTED

JOB KELLETT

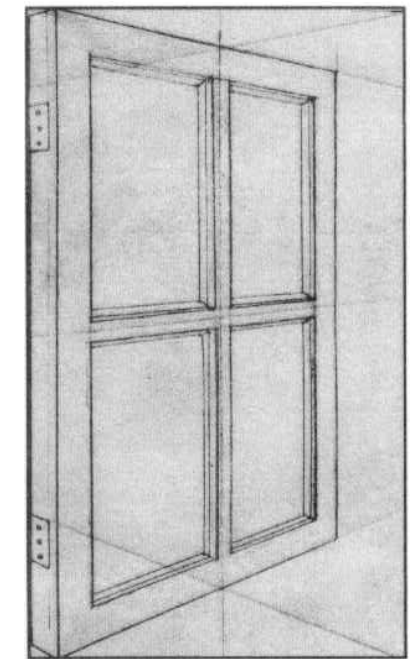
DRAWING ELECTRICAL PLANS

SCALE 1/4"=1'-0"

DATE 02-09-2015

E1

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