



# Commission of Architectural Review SUBMISSION APPLICATION

City of Richmond, Room 510 – City Hall  
900 East Broad Street, Richmond, Virginia 23219  
PHONE (804) 646-6335 FAX (804) 646-5789

12 COPIES OF SUPPORTING DOCUMENTATION ARE REQUIRED FOR PROCESSING YOUR SUBMISSION

LOCATION OF WORK: 3207 1/2 Monument Ave

DATE: 10/25/17

OWNER'S NAME: Jarrett & Nicole Williams

TEL NO.: 804-517-1814

AND ADDRESS: \_\_\_\_\_

EMAIL: nicolemaria.williams@gmail.com

CITY, STATE AND ZIP CODE: Richmond, VA 23221

ARCHITECT/CONTRACTOR'S NAME: Tom Vavra

TEL. NO.: \_\_\_\_\_

AND ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CITY, STATE AND ZIP CODE: \_\_\_\_\_

Would you like to receive your staff report via email? Yes  No

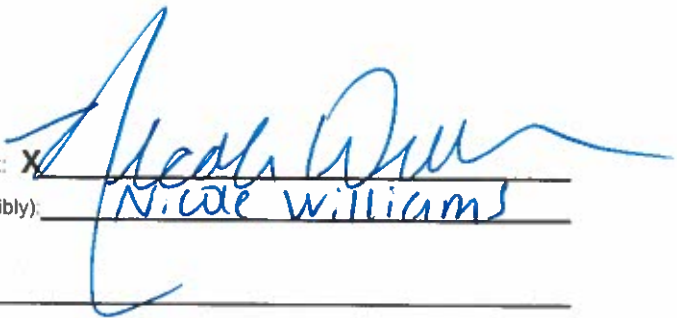
### REQUEST FOR CONCEPTUAL REVIEW

I hereby request Conceptual Review under the provisions of Chapter 114, Article IX, Division 4, Section 114-930 6(d) of the Richmond City Code for the proposal outlined below in accordance with materials accompanying this application. I understand that conceptual review is advisory only.

### APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

I hereby make application for the issuance of a certificate under the provisions of Chapter 114, Article IX, Division 4 (Old and Historic Districts) of the Richmond City Code for the proposal outlined below in accordance with plans and specifications accompanying this application.

**DETAILED DESCRIPTION OF PROPOSED WORK (Required):**  
**STATE HOW THE DESIGN REVIEW GUIDELINES INFORM THE DESIGN OF THE WORK PROPOSED.** (Include additional sheets of description if necessary, and 12 copies of artwork helpful in describing the project. The 12 copies are not required if the project is being reviewed for an administrative approval. See instruction sheet for requirements.)

Signature of Owner or Authorized Agent: X   
Name of Owner or Authorized Agent (please print legibly): Nicole Williams

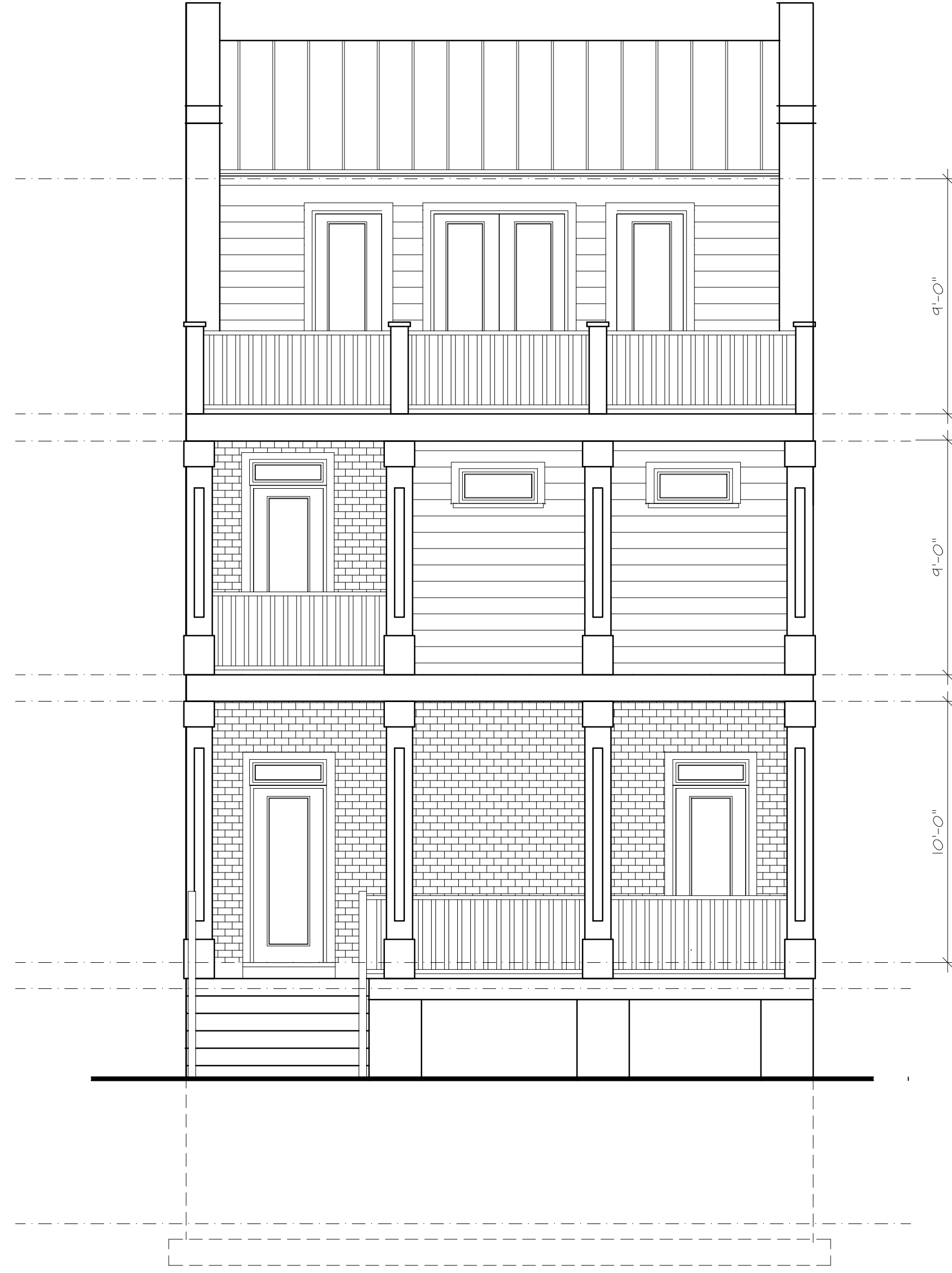
(Space below for staff use only) ECE VED  
Received by Commission Secretary ECE VED APPLICATION NO. \_\_\_\_\_  
DATE OCT 20 2017 OCT 25 2017 SCHEDULED FOR \_\_\_\_\_  
RM @ 1:33 P

Note: CAR reviews all applications on a case-by-case basis.

COA-022630-2017

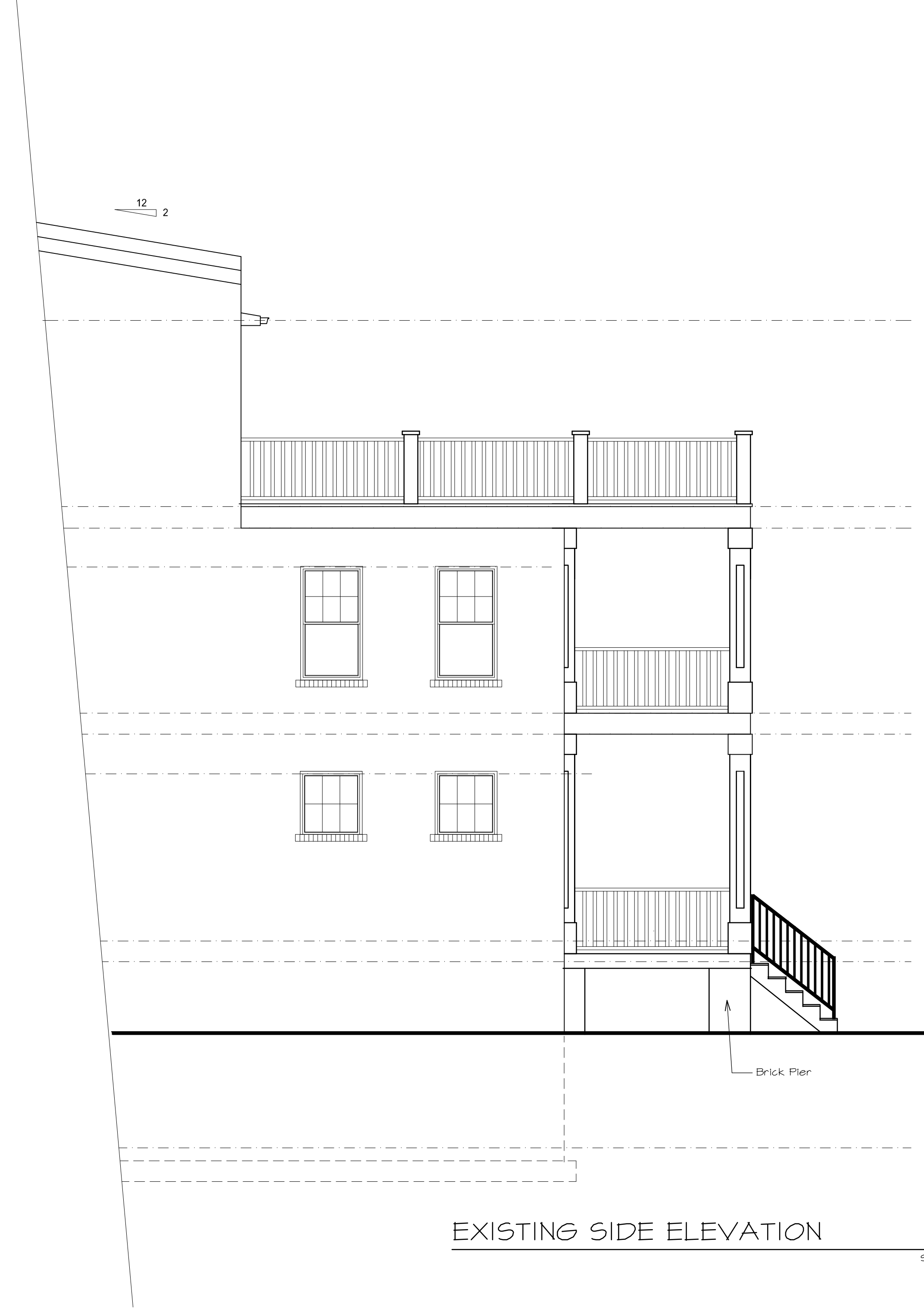






EXISTING REAR ELEVATION

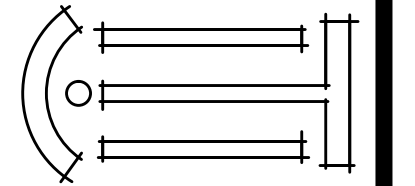
SCALE: 1/4" = 1'-0"



EXISTING SIDE ELEVATION

SCALE: 1/4" = 1'-0"

**BID SET  
NOT FOR CONSTRUCTION**



**TM VAVRA  
+ ASSOCIATES, P.C.**  
P.O. BOX 2249 23831  
CHESTER, VA  
PH: 804-269-5129  
tom@tmvavra.com

**WILLIAMS RESIDENCE  
3207 1/2 MONUMENT AVENUE  
EXISTING REAR & SIDE ELEVATIONS**

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REVISIONS BY	
PRELIMINARY	GB 0-17-17
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DATE:	1-25-17
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FILE NO.:	M-17018

SHEET NO.

**3**

