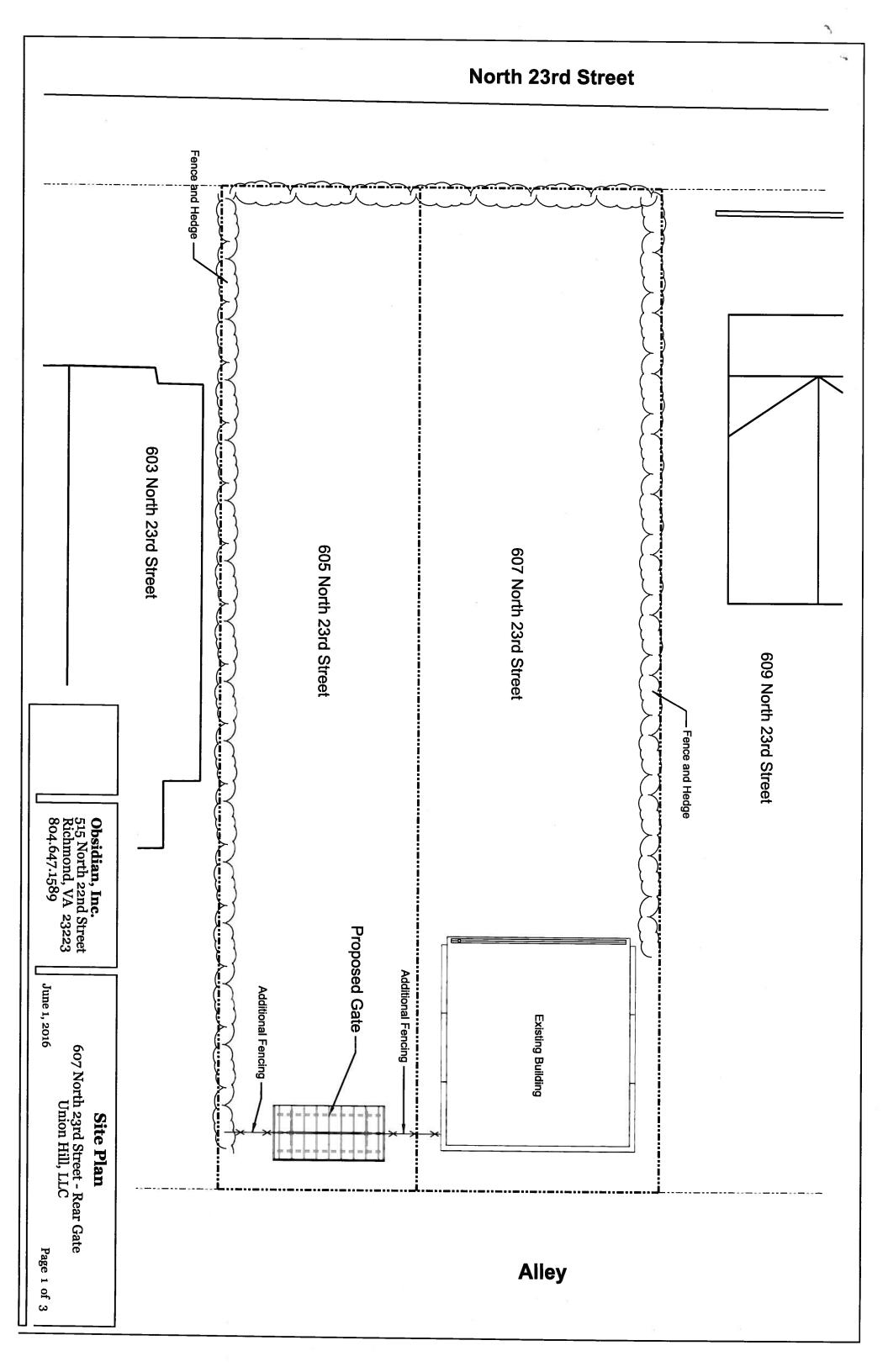
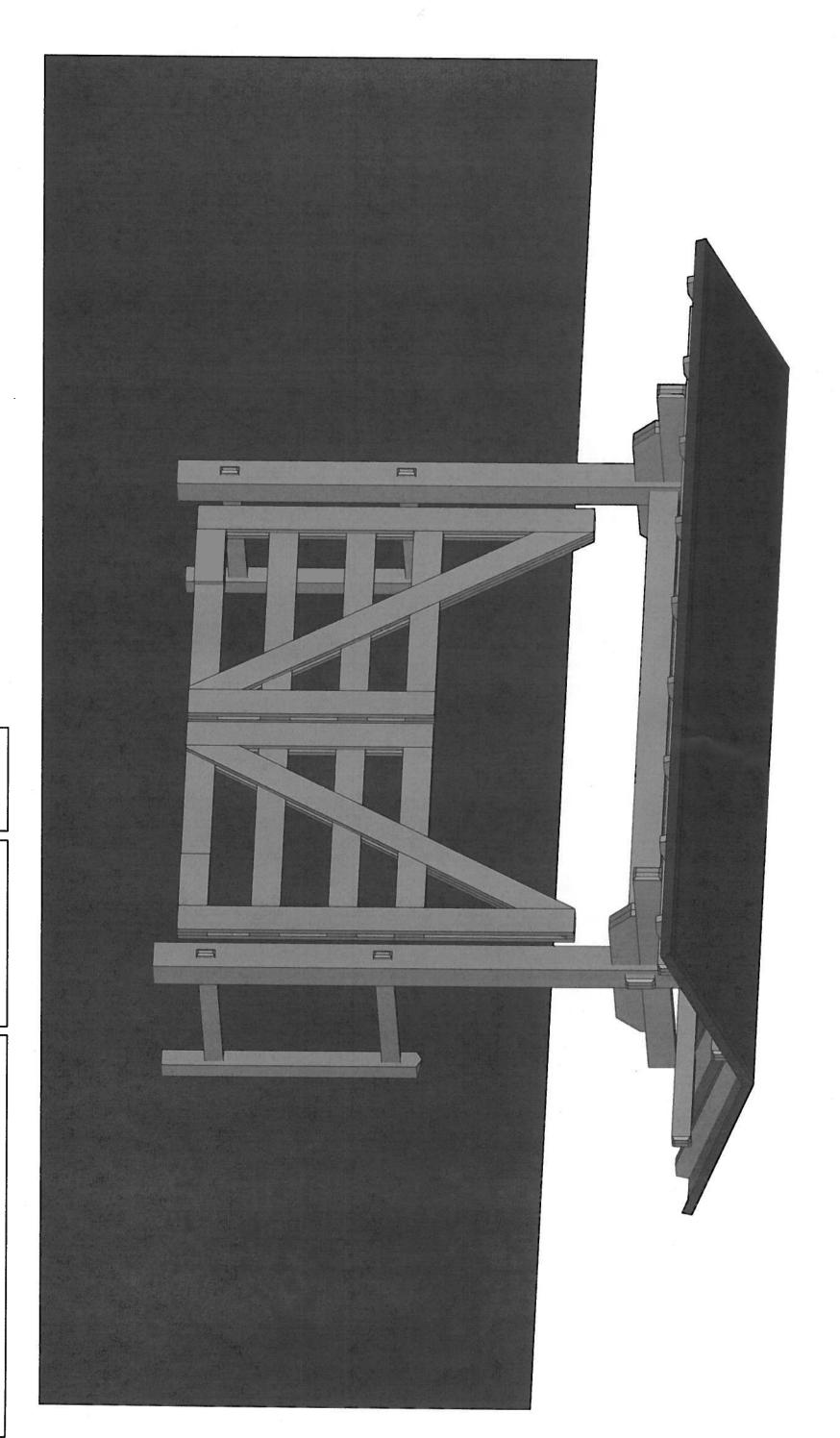


## Commission of Architectural Review Submission Application

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: 607 N. 22nd St.  | DATE: 2 June 2016           |
| OWNER'S NAME: Charles Field  | TEL NO.: 647-1589           |
| AND ADDRESS: 515 N 22nd St.  | EMAIL: crfield@obsidian.pro |
| CITY, STATE AND ZIPCODE: R/VA 23223  |                             |
| ARCHITECT/CONTRACTOR'S NAME:   | TEL. NO.:                   |
| AND ADDRESS:   | EMAIL:                      |
| CITY, STATE AND ZIPCODE:   |                             |
| 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.  |                             |
| <b>DETAILED DESCRIPTION OF PROPOSED WORK (Required):</b> 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): Christopher L. deTreville   |                             |
| (Space below for staff use only)   |                             |
| Received by Commission Forestery   | APPLICATION NO.             |
| DATE   | SCHEDULED FOR               |
| Note: CAR reviews all applications on a case-by-case basis.  |                             |





**Obsidian, Inc.** 515 North 22nd Street Richmond, VA 23223 804.647.1589

**Gate Isometeric** 

607 North 23rd Street - Rear Gate Union Hill, LLC

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June 1, 2016

