



# 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: 2107 East Marshall

DATE: 5/30/14

OWNER'S NAME: Audrey Auyeung

TEL NO.: 312-714-9559

AND ADDRESS: 2107 East Marshall

EMAIL: auyeungaw@vcu.edu

CITY, STATE AND ZIPCODE Richmond, VA

ARCHITECT/CONTRACTOR'S NAME: Savage Door Co.

TEL. NO. 804-840-3323

AND ADDRESS: 1800 Glencove Ln.

EMAIL: peter@savage-door.com

CITY, STATE AND ZIPCODE Richmond VA 23225

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.)

Replace Bedroom window's and bathroom with aluminum clad exact replication / replace existing downstairs living room windows with exact replication sashes only see reverse for full description →

Signature of Owner or Authorized Agent: X Peter Savage

Name of Owner or Authorized Agent (please print legibly): \_\_\_\_\_

(Space below for staff use only)

Received by Commission Secretary **RECEIVED**

APPLICATION NO. 14-62

DATE JUN 02 2014

SCHEDULED FOR 6/24/14

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

Revised 04-16-2013

replace existing windows in second floor  
facing street with exact replication replacement  
insulated clear glass wood clad interior  
aluminum clad exterior replacement frame  
from winser manufacturing

replace existing window sashes in first floor  
facing with exact replication fir sash and  
single pane window glass.

\* samples and drawings provided on request.

Savage Door Co.  
2107 East Marshall  
Richmond Va. 23223



(1) Living room  
(2) Living room

(3) Bedroom  
(4) Bedroom



(5) Bathroom



Livingroom gen damage



Livingroom

gen. damage





Bathroom open #3





Bathroom gph #2



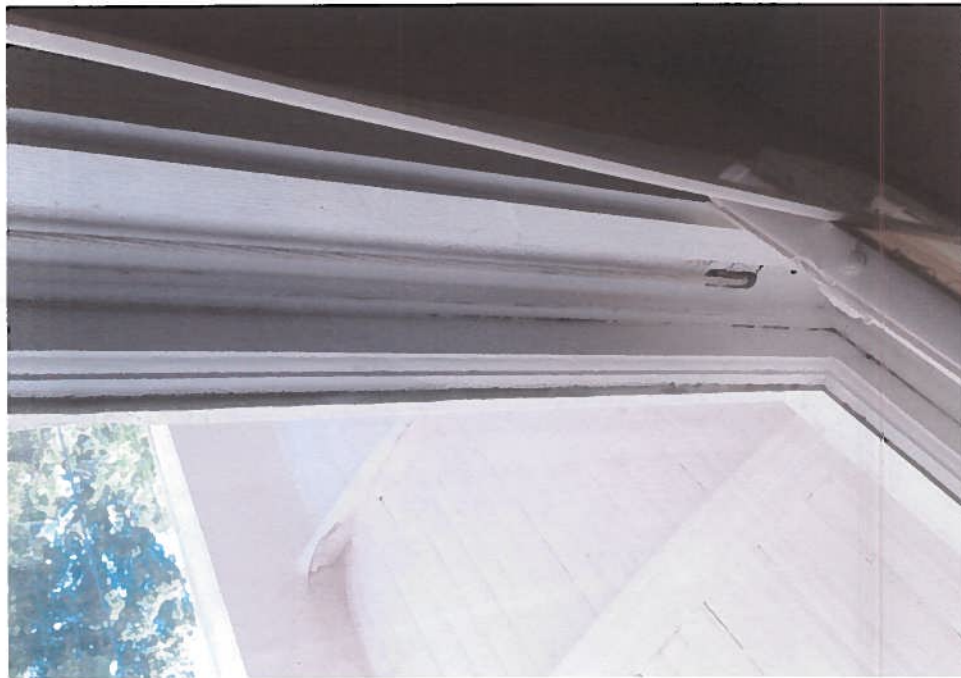
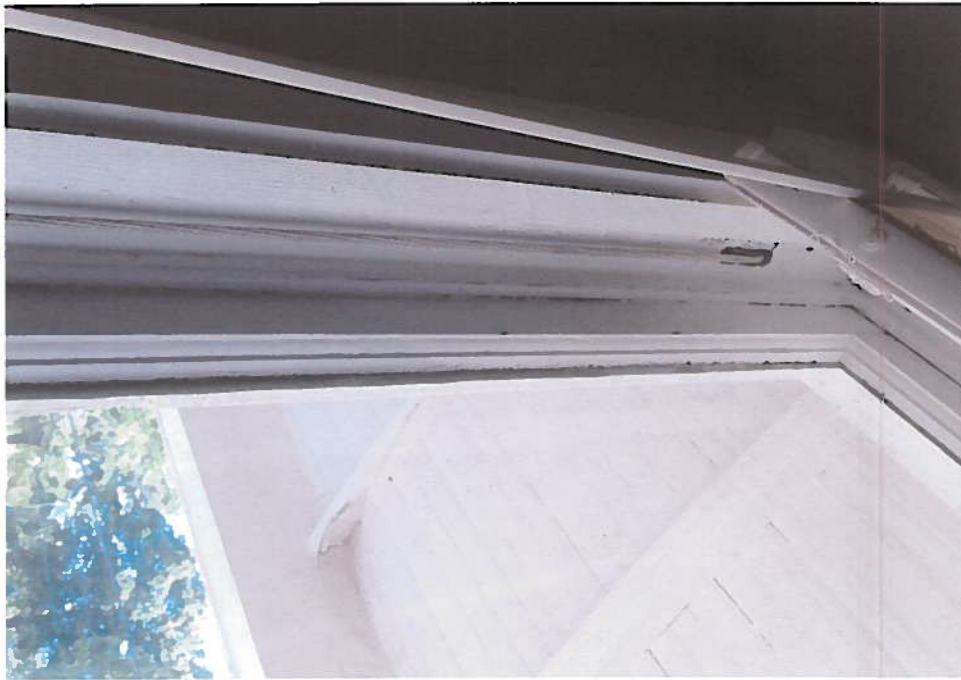


Bathroom gen #1





Living room Window #2





Living room Window #1





Bedroom Window # 2



Bedroom Window #1 gen 2





Bedroom Window #1 gen 1

