TOWN OF ABINGDON
Abingdon, Virginia

The Historic Preservation Review Board welcomes you to this meeting today. This is a citizen Board, appointed by the Town Council, to interpret and uphold the Historic Preservation Ordinance, which is Article 8 of the Abingdon Zoning Ordinance, that protects the Historic District of Abingdon which has been designated the Old and Historic District. Our aim on this Board is to provide a positive bridge between the property owners of the district and the design review process, so we welcome you to today's meeting. We appreciate your interest and we encourage public participation in our meeting. Your comments are important to our decision making process. Anyone addressing the Board will approach the podium; give your ***first and last name*** *and your* ***complete physical address.***

TO: Historic Preservation Review Board Members

FROM: Jason Boswell, Director of Planning

RE: Regular meeting
Wednesday, June 7, 2017 – 5: 15 p.m.
Abingdon Municipal Building, Colonel Arthur Campbell room

Items on the agenda:

1. Roll Call

2. Approval of Minutes: Regular meeting, May 3, 2017

3. Certificate of Appropriateness: **Carol Jones, Owner; James McCaslin, representative** 215 East Valley Street, Abingdon, VA 24210, application for Certificate of Appropriateness for sign. Located at **215 East Valley Street. Tax Map No. 013-1-13.** Request to add new signage.

4. Certificate of Appropriateness: **Doug Ellis, (Ellis Building) Owner;** 211 W. Main St., Abingdon, VA 24210, Tax Map No. 012-1-71 **owner;** request to place permanent fence at location previously discussed.

5. Certificate of Appropriateness - **Mamma Mia Restaurant, Saad Abdelbassett, representative;** 134 Wall Street, Tax Map No. 019-2-16. Nathalie and Nick Shortridge, **Owners;** request to install signage.

6. Application for Tax Abetment: **Jeff Johnson Owner**, 102 W. Main Street, Abingdon, Va. 24210 Tax Map No. 012-1-102.

7. Certificate of Appropriateness: **Bruce A. Hartshorn, Owner** 227 East Main Street, Abingdon, VA. Tax Map No. 013-1-66. Request to replace old shingle roof with new metal roof, gutters. Add Dormer in back facing Plum Alley, to create new bedroom in attic space.

8. DISCUSSION ITEMS–

8. ADJOURN

If you are unable to attend this meeting, please call 276-492-2125.

Please bring your agenda information to the meeting with you.

Town of Abingdon, Virginia
Department of Planning

Sign Permit Application

Application is hereby made for a Sign Permit under Article 21 of the Zoning Ordinance of the Town of Abingdon, other local ordinances and the Code of Virginia, 1950 (as amended).
Application must include a full color design of the proposed sign.

Applicant Information:

Name of Owner: Waterford Holding company- Carol Jones

Name of Business (if applicable): Community Alternatives Virginia Inc. d/b/a Creative Family Solutions

Address: 215 Valley St. NE Telephone: (276) 628-4385

Representative: James McCaslin

(Representatives should have authority to commit applicant to changes suggested by the Planning Commission)

Representative is: ☑ Lessee/Renter ☐ Other (please specify): _____

Representative's Telephone Number: (276)274-6965 Email: james.mccaslin@rescare.com

Representative's Address: 215 Valley St. NE

Sign Information:

Location: 215 Valley St. NE Abingdon, VA 24210

Tax Map Number: _____

Description of proposal (attach separate sheet if necessary): _____

Proposal is to add signage identifying the company as Community Alternatives VA Inc d/b/a Creative Family Solution

Additional Details:

Map showing location of property.

Site Plan where applicable as required under section 18-1 of the Zoning Ordinance.

Plans, sketches, drawings, elevations or designs as required under Article 21 of the Zoning Ordinance.

Photographs or slides showing property in question; street views.

Specify all materials (i.e. metal, wood, acrylic, etc.) and colors used: _____

Wood plywood

Overall Size: 24 inch x 34 inch Background Color: green Letter Color: white

Border Color: white **Note: color sign design must be attached.**

Additional Details (continued):

Description of sign mounting type and location: _____

Existing sign holding structure is already in place

Wording on sign: Community Alternatives Virginia Inc. Creative Family Solutions

Other details: _____

Historic District Signs: Require a Certificate of Appropriateness from the Historic Preservation Review Board.

Certification:

Name of Contractor: _____

Signature of Owner: Carol F Jones Date: 4-28-17

Signature of Representative: James McLaughlin Date: 4/13/17

Note: In accordance with section 21-6-2 of the Town of Abingdon Zoning Ordinance, this Sign Permit is valid for a period of one year. A fee of one dollar ($1.00) per square foot of sign area is to be made payable to the Town of Abingdon.

Sign Permit Fee: _____

To Be Completed By Staff Only:

Action Taken:

- ☐ Approved as presented.
- ☐ Disapproved (see below for explanation).
- ☐ Modified and approved (see below for modifications).

Modifications / Reasons for Disapproval:

_____

Signature: _____ Date: _____

Department of Planning, Town of Abingdon

If you have any questions, please call the Planning Department at 276-628-3167

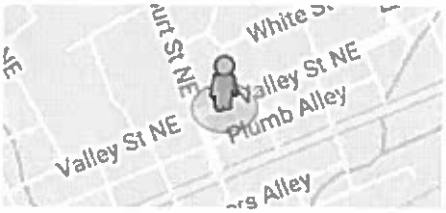
This certificate expires six months after the date of issue.

Google Maps 201 Valley St NE

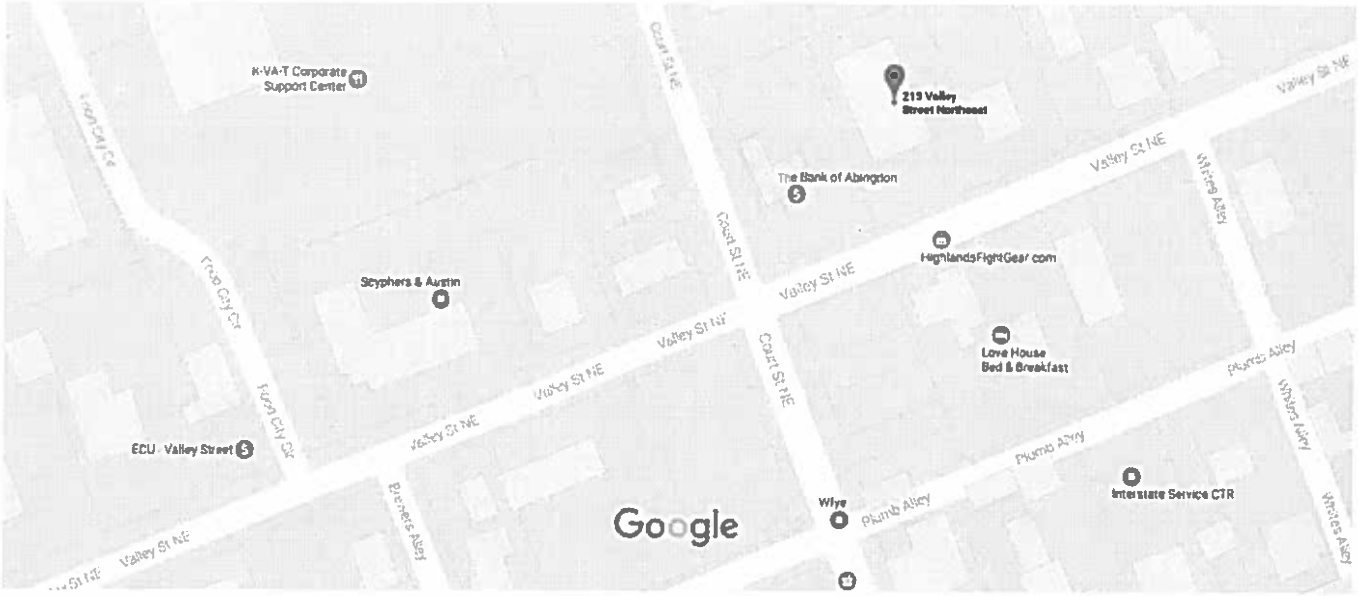
Image capture: Jul 2009 © 2017 Google

Abingdon, Virginia

Street View - Jul 2009



Google Maps 215 Valley St NE



Map data ©2017 Google 50 ft

ResCare
NOW HIRIN
Direct Care Professio
Paid Training & Competitive Be
1-855-203-19
Apply In-Person or O
NOW LEASING
SPACES

Community Alternatives VA Inc

Creative Family Solutions

Abingdon, Virginia

IMPORTANT NOTE:
The complete application must be filed with the Town of Abingdon's Office of Planning and Zoning no later than the third Monday of the month to be heard at the next month's Historic Preservation Review Board meeting. Applications received after the third Monday of the month will be heard at the following month's meeting. If an application is not complete, it will not be included on the meeting agenda. To avoid delays, it is recommended that applicants review the Old and Historic District's Design Guidelines found at www.abingdon-va.gov/announcements.htm#BAR and meet with Planning Department staff before the deadline to review their application.

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
Town of Abingdon, Virginia

Historic Preservation Review Board
133 East Main Street • P.O. Box 789 • Abingdon, VA 24212
Phone: (276) 628-3167 • Fax: (276) 698-3412

Location of Property: 211 W. Main St.	Historic District?: ☑ Yes ☐ No
Business Name (if applicable): Ellis Building	Tax Map No: 012-1-71
Applicant/Property Owner Name (PRINT): Doug Ellis	Representative Agent(s) Name: Doug Ellis
Signature: [signature]	Firm:
Mailing Address: 135 Longview Dr	Mailing Address:
City: Abingdon, Va 24211	City:
State/Zip:	State/Zip:
Phone/Fax Number: 276-608-3674	Phone/Fax Number:
Email: hdellis@ellissal-shoppe.com	Email:

(Check the Appropriate Boxes - Check all that Apply)

	Exterior Change		Addition		Relocation
✓	Wall/Fence		Deck/Porch		Demolition
✓	Driveway/Parking Area		New Structure/Building		Grounds/Landscaping
	Dumpster/HVAC, etc. screen		Other _____		Other _____

Per Abingdon, Virginia Code of Ordinances, you may be eligible for local tax credits/abatements. Are you requesting tax credits/abatements for this project? ☐ Yes ☑ No

The above named person(s)/firm has permission to represent me regarding this request for architectural review. I understand that I or my representative agent(s) must be present at the Historic Preservation Review Board meeting, on the date assigned by staff, typically the first Wednesday of each month at 5:15 p.m., to present my proposal and that failure to attend may result in the denial of my proposal by the Review Board due to insufficient information. No material change in the appearance of my property, that is viewable from any public street, shall be performed before receiving a Certificate of Appropriateness. I further understand that approval by the Historic Preservation Review Board for any modifications to homes, buildings, landscaping, or grounds including fences, driveways, and parking areas shall expire 12 months from the date of approval. I hereby authorize town staff and/or members of the Historic Preservation Review Board the right to enter onto my property during normal business hours for the purposes of investigating my request for a Certificate of Appropriateness.

Signed [signature] Date 5/15/17

PLEASE READ:
Applicants are encouraged to submit complete applications with sufficient information to allow a clear understanding of the proposal by the Historic Preservation Review Board members and Planning Department staff. Applications that do not clearly communicate the proposed new construction, alterations or changes will result in delays. Planning Department staff will periodically inspect properties for compliance with the COA. Failure to comply may also result in delays in the issuance of a Certificate of Occupancy, fines, or other enforcement actions.

FULL DESCRIPTION OF PROPOSAL: (please attach more sheets if necessary)

Place Permanent fence @ location previously discussed. Identical fence (Bolton) to the one around sinking spring cemetery 50" tall. Create courtyard inside area.

REQUIRED INFORMATION TO BE SUBMITTED WITH APPLICATION:

Each item submitted is to be INITIALED by the applicant. If you are not submitting any of the requested information, please indicate "not applicable" and explain in the space provided why it is not necessary for this project.

- [x] Sketch, drawing and/or elevations showing the proposed changes or improvements, and an adequate number of photographs to show the area of the proposed alteration
- [ ] Site plan or plat of property
- [ ] A list of materials including color samples that identifies the type and quality of materials to be used in the Proposed Project
- [ ] $50.00 application fee if requesting tax credits
- [ ] Are you requesting tax credits for this project?
- [ ] Other (please attach more sheets if necessary)

To be Completed/Initialed by Planning Department Staff

___ COA application has been reviewed and deemed to be complete.
___ List of adjoining property owners notified of this COA application has been attached to this application.

Code: 011/Budget line item: 100-3-13-030-0400

Abingdon, Virginia

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APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
Town of Abingdon, Virginia

Historic Preservation Review Board
133 East Main Street • P.O. Box 789 • Abingdon, VA 24212
Phone: (276) 628-3167 • Fax: (276) 698-3412

Location of Property: 134 N W. Wall st. Abingdon	Historic District?: [X] Yes [ ] No
Business Name (if applicable): Mamma mia	Tax Map No:
Applicant/Property Owner Name (PRINT): BASSETT	Representative Agent(s) Name:
Signature:	Firm:
Mailing Address: 628 Locust st. Abingdon	Mailing Address:
City: Abingdon	City:
State/Zip: VA. 24210	State/Zip:
Phone/Fax Number: 2762748229	Phone/Fax Number:
Email: ayebbasset@Gmail.com	Email:

(Check the Appropriate Boxes - Check all that Apply)

[X]	Exterior Change	[ ]	Addition	[ ]	Relocation
[ ]	Wall/Fence	[ ]	Deck/Porch	[ ]	Demolition
[ ]	Driveway/Parking Area	[ ]	New Structure/Building	[ ]	Grounds/Landscaping
[ ]	Dumpster/HVAC, etc. screen	[ ]	Other _____	[ ]	Other _____

Per Abingdon, Virginia Code of Ordinances, you may be eligible for local tax credits/abatements. Are you requesting tax credits/abatements for this project? [ ] Yes [X] No

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Signed _____ Date 3-22-17

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FULL DESCRIPTION OF PROPOSAL: (please attach more sheets if necessary)

3 (b) mount the signe on the sheet corner of building

4 Green awning or Green with white stripes or Red stripes

5 pave the back parking Lot.

REQUIRED INFORMATION TO BE SUBMITTED WITH APPLICATION:

Each item submitted is to be INITIALED by the applicant. If you are not submitting any of the requested information, please indicate "not applicable" and explain in the space provided why it is not necessary for this project.

☐ Sketch, drawing and/or elevations showing the proposed changes or improvements, and an adequate number of photographs to show the area of the proposed alteration

☐ Site plan or plat of property

☐ A list of materials including color samples that identifies the type and quality of materials to be used in the Proposed Project

☐ $50.00 application fee if requesting tax credits

☐ Are you requesting tax credits for this project?

☐ Other (please attach more sheets if necessary)

To be Completed/Initialed by Planning Department Staff

___ COA application has been reviewed and deemed to be complete.
___ List of adjoining property owners notified of this COA application has been attached to this application.

Code: 011/Budget line item: 100-3-13-030-0400

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FULL DESCRIPTION OF PROPOSAL: (please attach more sheets if necessary)

(1) paint the Extirior building wright or Clean the wright Existing Colore (back to the original brick colore)

(2) paint the top black section All around with Green color (attached are the codes Im intrested in)

(3) mount the signe on the ~~po~~ electric post. and put the second one above the awning ~~and change the awning color~~ to

REQUIRED INFORMATION TO BE SUBMITTED WITH APPLICATION:

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- [x] Sketch, drawing and/or elevations showing the proposed changes or improvements, and an adequate number of photographs to show the area of the proposed alteration
- [ ] Site plan or plat of property
- [x] A list of materials including color samples that identifies the type and quality of materials to be used in the Proposed Project
- [x] $50.00 application fee if requesting tax credits
- [ ] Are you requesting tax credits for this project? NO
- [ ] Other (please attach more sheets if necessary)

To be Completed/Initialed by Planning Department Staff

___ COA application has been reviewed and deemed to be complete.
___ List of adjoining property owners notified of this COA application has been attached to this application.

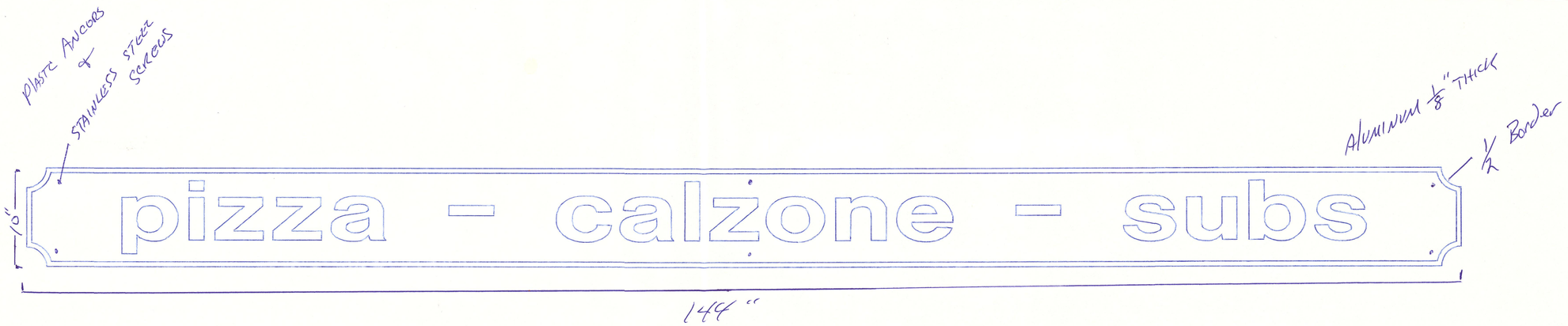
Code: 011/Budget line item: 100-3-13-030-0400

PIZZA . Calzone . SUBS

6"

6 F'

Red
or
Green letters


PLASTIC ANCORS
&
STAINLESS STEEL
SCREWS
ALUMINUM 1/8" THICK
1/2 Border
pizza - calzone - subs
10"
144"

MAMMA MIA

ITALALIANO RESTAURANTE

Abingdon, Virginia

IMPORTANT NOTE:
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APPLICATION FOR CERTIFICATE OF APPROPRIATENESS
Town of Abingdon, Virginia

Historic Preservation Review Board
133 East Main Street • P.O. Box 789
Abingdon, VA 24212
Phone: (276) 628-3167 • Fax: (276) 698-3412

Location of Property	102 E. Main Street	Historic District	
Business Name		Tax Map No:	

Applicant/Property/Owner Name (PRINT) Jeffrey E. Johnson	Representative Agent(s) Name Jeffrey E. Johnson
Signature	Firm
Mailing Address 102 E. Main Street	Mailing Address
City Abingdon	City
State/Zip Virginia	State/Zip
Phone/Fax Number: 276-608-3700	Phone/Fax Number:
Email: jjohnson@paramontltd.com	Email:

(Check the Appropriate Boxes - Check all that Apply)

	Exterior Change		Addition		Relocation
	Wall/Fence	✓	Deck/Porch		Demolition
	Driveway/Parking Area		New Structure/Building		Grounds/Landscaping
	Dumpster/HVAC, etc. screen	✓	Other Windows		Other _____

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Signed Jeffrey E Johnson Date 4/20/15

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FULL DESCRIPTION OF PROPOSAL:

Repair/replace spindles on porch railing that are decayed and repaint in same color; pressure wash and re-stain the decking in its current color; and reglaze/repair windows as needed (primarily on the west side (Church Street) of the house first).

REQUIRED INFORMATION TO BE SUBMITTED WITH APPLICATION:

Each item submitted is to be INITIALED by the applicant. If you are not submitting any of the requested information, please indicate "not applicable" and explain in the space provided why it is not necessary for this project.

___ Sketch, drawing and/or elevations showing the proposed changes or improvements

___ Site plan or plat of property

✓ Adequate number of photographs to show the area of the proposed alteration

___ A list of materials including color samples that identifies the type and quality of materials to be used in the Proposed Project

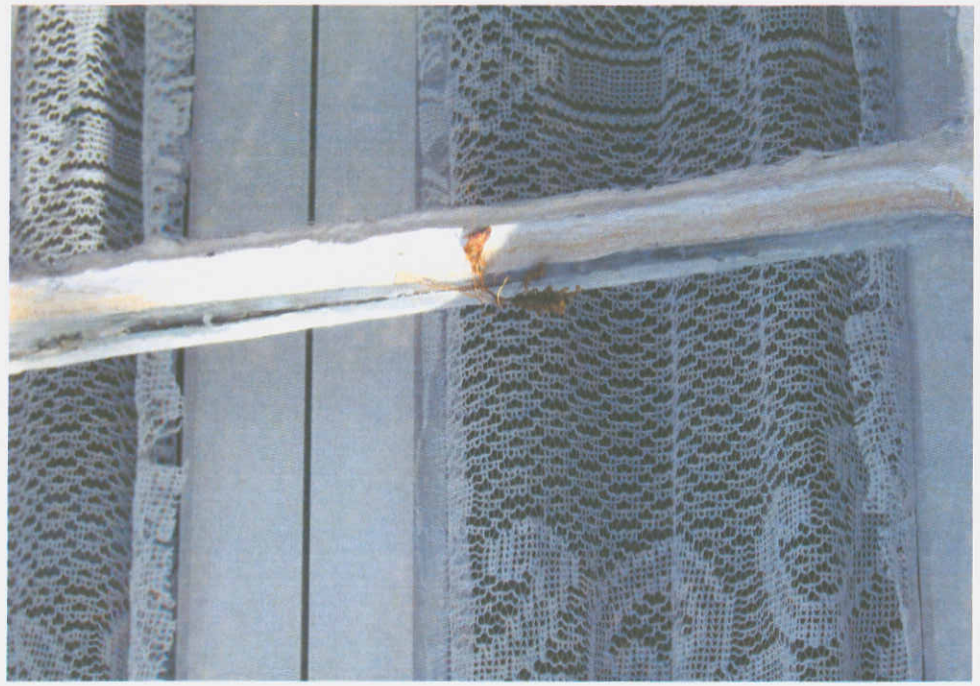
✓ $50.00 application fee

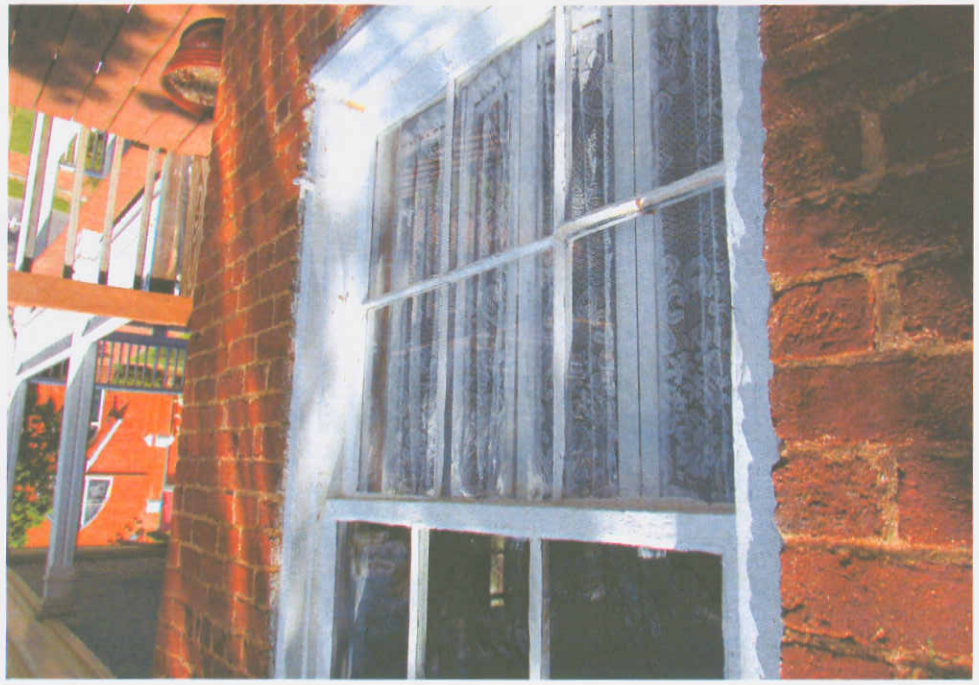
___ Other (please attach more sheets if necessary)

To be Completed/Initialed by Planning Department Staff

___ COA application has been reviewed and deemed to be complete.

___ List of adjoining property owners notified of this COA application has been attached to this application.





Paid- Joe Yarber
$1000.00 From- Jeff Johnson
7-6-2015

By John Mullard
JM

* Spindles for front steps

John Michal Home Improvement & Repair,
Inc
P.O Box 1166
Abingdon,, VA 24212-1166
Lic.# 2705030365

Invoice

Date	Invoice #
7/9/2015	324

Bill To

Jeffery Johnson
102 E. Main St.
Abingdon, Va. 24210

Project

Item	Description	Amount
	At the front of the house remove the spindles from the side and bottom rails. Pick up stock from Abindon Millworks and have the spindles turned by Joe Yarber. Repair the handrail, spindle base and posts as needed. Install the new spindles and apply linseed oil to seal the new wood. Haul away the trash	
labor		2,125.00
materials		615.00
misc. exp.	tool expense	50.00

PD
CK# 7208
JM

7208
7/10/15

Total $2,790.00

Phone #
276 628 2205

E-mail
johnmichalhomes@yahoo.com

Highlands Glass Company
763 Cummings Street
Abingdon, VA 24211
(276) 623-0021
highlandsglass@comcast.net

Highlands Glass Company

INVOICE

BILL TO
Jeff Johnson
102 East Main Street
Abingdon, VA 24210

INVOICE # 15658
DATE 10/05/2016
DUE DATE 10/05/2016
TERMS Due on receipt

PMT METHOD
Visa

ACTIVITY	QTY	RATE	AMOUNT
MISC storm sash windows - 41" X 71 3/4"	4	115.68	462.72T
MISC storm sash windows - 35 1/8" x 57"	1	87.02	87.02T
Labor2 Labor	1	400.00	400.00

PAID

SUBTOTAL	949.74
TAX (5.3%)	29.14
TOTAL	978.88
DEPOSIT	978.88
BALANCE DUE	**$0.00**

Highlands Glass Company

729 Cummings Street, Ste 3
Abingdon, VA 24211
(276)623-0021
highlandsglass@comcast.net

(276)623-0021
HIGHLANDS GLASS CO LLC
729 CUMMINGS ST STE 3
ABINGDON, VA 24211

08/27/2015 13:54:10
MID: 000000003632335
TID: 05556908
434540815884

CREDIT CARD
MC SALE

CARD: XXXXXXXXXXXX3389
INVOICE 0001
Batch #: 000484
APP Code: 33116P
Entry Mode: Manual
Mode: Online

SALE AMT $861.58

CUSTOMER COPY

INVOICE

BILL TO
Walk-Ins
Jeff Johnson
608-3700
102 E Main St
Abingdon VA 24210

ACTIVITY	QTY
MISC Storm Sash Panel Build 70 1/2 x 41 1/4	4
Labor1 Labor and trip	1

SUBTOTAL
TAX (5.3%)
TOTAL
BALANCE DUE

Abingdon, Virginia

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Town of Abingdon, Virginia

Historic Preservation Review Board
133 East Main Street • P.O. Box 789 • Abingdon, VA 24212
Phone: (276) 628-3167 • Fax: (276) 698-3412

Location of Property: 227 East Main Street	Historic District?: [X] Yes [ ] No
Business Name (if applicable):	Tax Map No: 013-1-66
Applicant/Property Owner Name (PRINT): BRUCE A. HARTSHORN	Representative Agent(s) Name:
Signature: [signature]	Firm:
Mailing Address: 356 AUGUSTA DR	Mailing Address:
City: ABINGDON	City:
State/Zip: VA 24211	State/Zip:
Phone/Fax Number: 276-232-0337	Phone/Fax Number:
Email: brucehartshorn@gmail.com	Email:

(Check the Appropriate Boxes - Check all that Apply)

[X]	Exterior Change	[X]	Addition	[ ]	Relocation
[ ]	Wall/Fence	[ ]	Deck/Porch	[ ]	Demolition
[ ]	Driveway/Parking Area	[ ]	New Structure/Building	[ ]	Grounds/Landscaping
[ ]	Dumpster/HVAC, etc. screen	[ ]	Other _____	[ ]	Other _____

Per Abingdon, Virginia Code of Ordinances, you may be eligible for local tax credits/abatements. Are you requesting tax credits/abatements for this project? [X] Yes [ ] No

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Signed [signature] Date 5-22-17

BAH

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FULL DESCRIPTION OF PROPOSAL: (please attach more sheets if necessary)

Old Shingle Roof is in poor condition.
Replace with new Metal Roof and Gutters.
Add Dormer in back facing Plum Alley.
Create new bedroom in Attic space.

REQUIRED INFORMATION TO BE SUBMITTED WITH APPLICATION:

Each item submitted is to be INITIALED by the applicant. If you are not submitting any of the requested information, please indicate "not applicable" and explain in the space provided why it is not necessary for this project.

- [x] Sketch, drawing and/or elevations showing the proposed changes or improvements, and an adequate number of photographs to show the area of the proposed alteration
- [ ] Site plan or plat of property - Only Roof Change
- [x] A list of materials including color samples that identifies the type and quality of materials to be used in the Proposed Project
  - Metal Roofing - Green (existing color)
  - Gutters - White - Half Round
  - Paint - No Changes - Grey
- [x] $50.00 application fee if requesting tax credits
- [ ] Are you requesting tax credits for this project?
- [ ] Other (please attach more sheets if necessary)

To be Completed/Initialed by Planning Department Staff

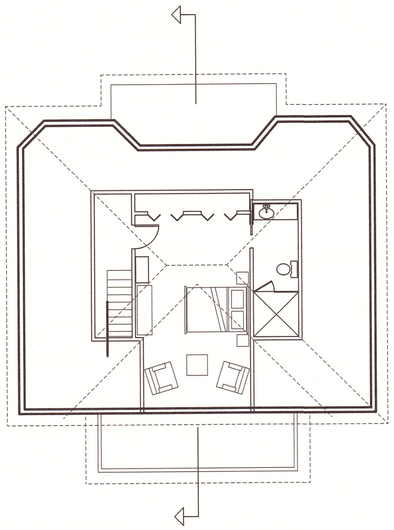
___ COA application has been reviewed and deemed to be complete.
___ List of adjoining property owners notified of this COA application has been attached to this application.

Code: 011/Budget line item: 100-3-13-030-0400

BAH

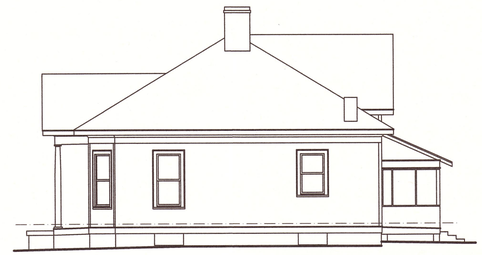
BAH

84H



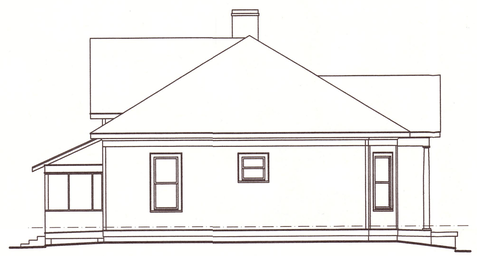
ATTIC FLOOR PLAN

FRONT ELEVATION



RIGHT ELEVATION

REAR ELEVATION



LEFT ELEVATION

SECTION A-A

NOT FOR CONSTRUCTION

PEYTON BOYD ARCHITECT PC

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Addition and Renovations to:
227 E. MAIN ST.
ABINGDON, VIRGINIA

PROPOSED FLOOR PLAN, ELEVATIONS AND BUILDING SECTION

SCALE: 1/8" = 1'-0"

DATE

DRAWING

EX.1

CADFILE – 1706 DD01.AEC PLOT DATE 05/10/17