

DDS- Planning & Zoning: Historic Review Application



Submission date: **16 May 2022, 4:22PM**
Receipt number: **648**
Related form version: **2**

Property Information

Property Address
Street: 12 shultas place
City: hartford
State: ct
Zip Code: 06114

Zoning District: **n5-3**

Parcel ID: **250579204**

Property Owner: **Gladys Padilla and Ricardo Padilla**

Property Owner's Address:
Street: 12 Shultas place
City: Hartford
State: CT
Zip Code: 06114

Phone: **860 967 6576**

Email: **g_olique@yahoo.com**

Applicant

Please check if "Applicant" is the same as "Property Owner"

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Name of Applicant: **gladys padilla**

File Date: **05/16/2022**

Address:

Street: 12 Shultas Place

City: Hartford

State: CT

Zip Code: 06114

Phone:

860 967 6576

Email:

Primary Point of Contact

Name:

Ricardo Padilla

Phone:

860 967 6576

Email:

Describe your application action(s) and provide as much detail as possible. **Demolish the front porch and rebuild except the ceiling**

Proposed work:

**Demolition
New Construction**

Current materials being repaired/replaced:

wood

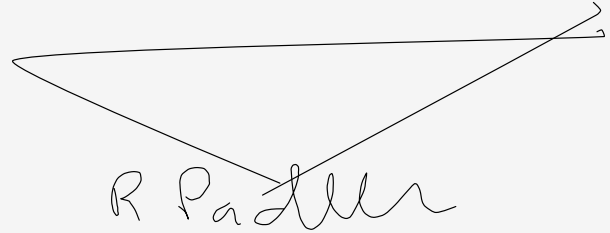
Materials/products being used in work:

foundation is going to be wood and cover in acek and stair and floor trex

Please upload all supporting materials and photographs below.

Signatures

Signature of Applicant:



R Padilla

[Link to signature](#)

Name of Applicant:

Ricardo Padilla

Date:

5/16/22

If you are not the property owner, you must attach a Letter of Authorization from the property owner to apply.

Letter of Authorization from Property Owner

Date:

5/16/22



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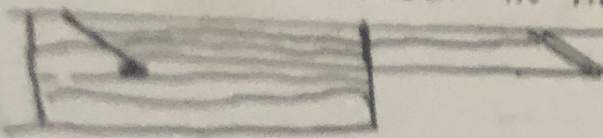
12

12

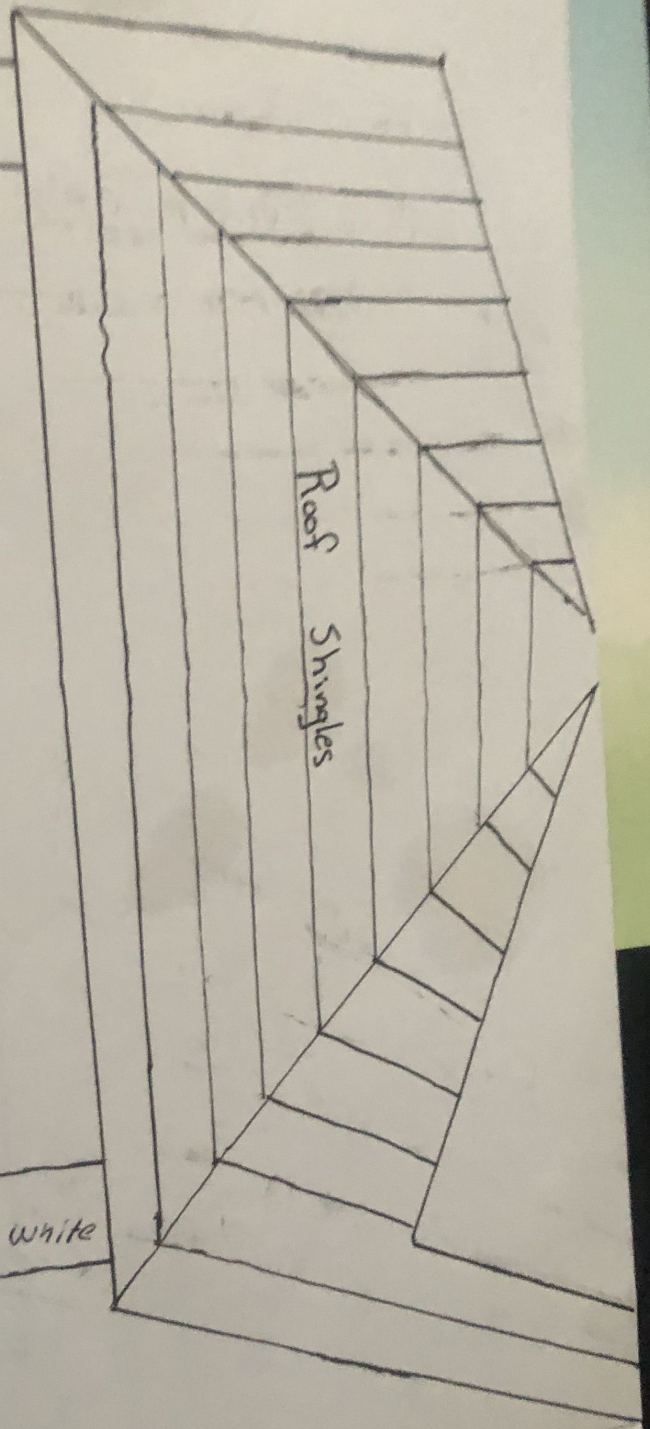


Trinity Health
of Michigan
EMPLOYEE
PARKING PERMIT
01180

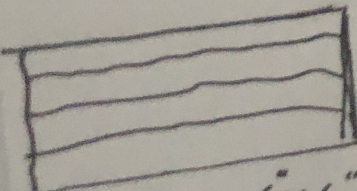
6"x6" cover in Azek white



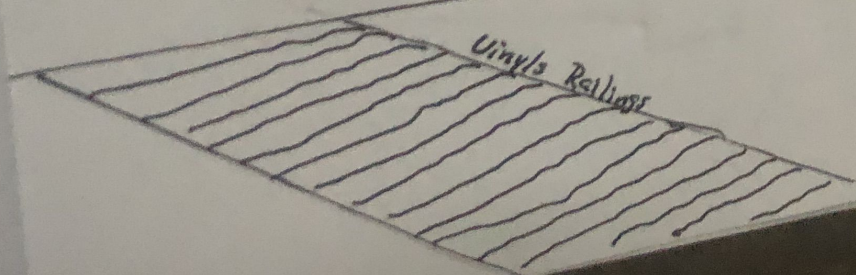
Roof Shingles

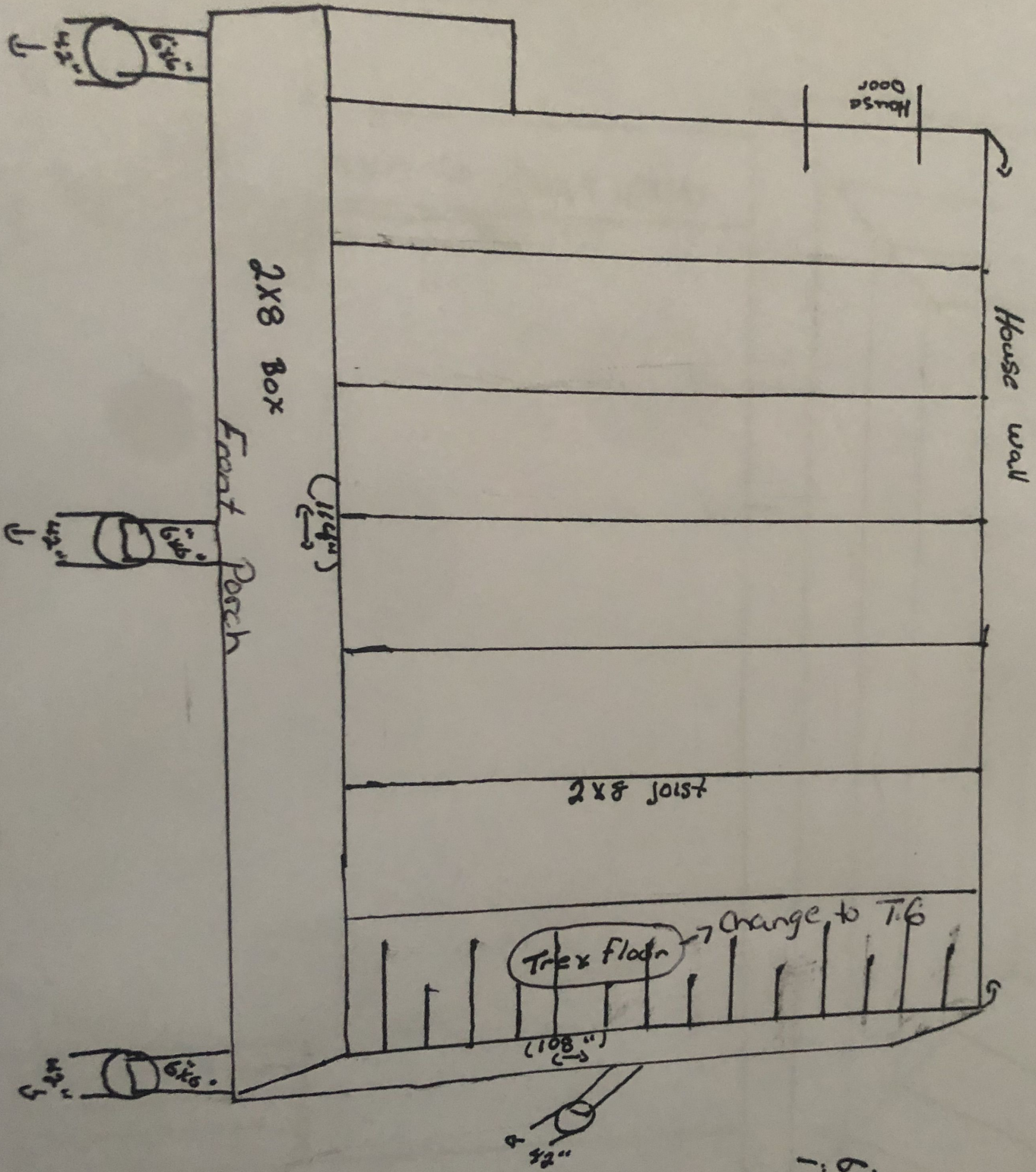


6"x6" cover in Azek white

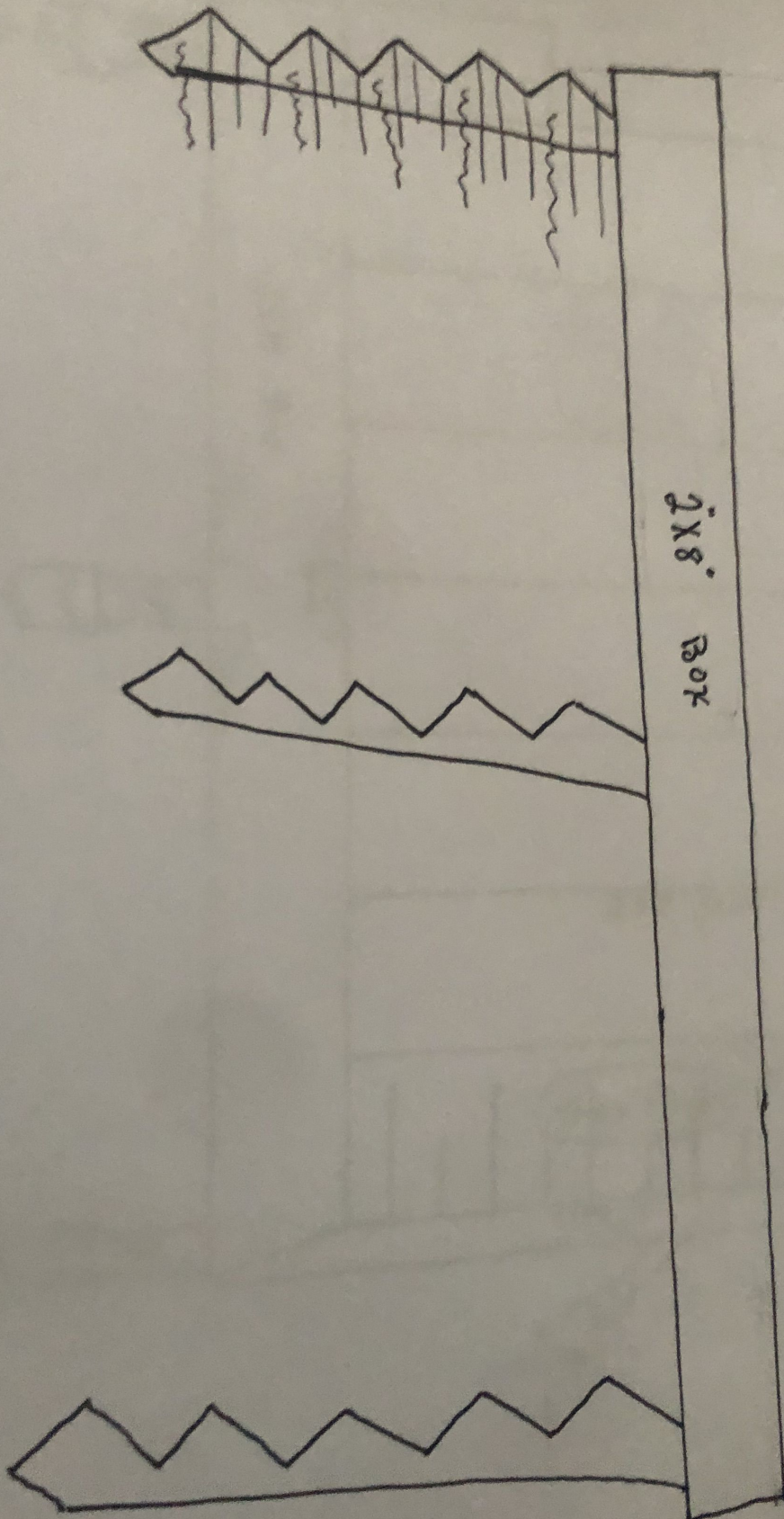


Vinyl's Railings





6x6 Support Roof
 1x6 Floor Trax
 Change to T.G



2x8' Box