



The City of
OKLAHOMA CITY

Staff Only:

Date Stamp

Zoning: HP or HL

District: _____

HPCA: -

Received by: _____

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

NOTE: any relevant permits must be applied for and paid for separately in the Development Services Dept.

NOTE: Contact Historic Preservation Staff for final design inspection when work is complete.

Location of Proposed Work (Address): 820 NW 39th Street, Oklahoma City, OK 73118

Legal Description of Property (lot, block, addition): Lot 6, Block 6, Crown Heights Addition

Year built: 1934 Exterior wall material: Brick & Stone Floor area: 440 sq.ft.

Itemized Work Items (List EACH ITEM proposed. Work not listed here will NOT be reviewed):

☐ New Construction ☐ Addition ☐ Fence ☐ Demolition (specify structure) _____

☐ Paving (specify) _____ ☐ Renovation (specify) _____

☒ Work not specified above Replacement of two existing wooden garage doors with new wooden garage doors

Replace existing French doors & side lights with like kind
wood trim divided light doors

Owner's Authorization

I hereby certify that all above statements and statements contained in all attached and transmitted exhibits are true to the best of my knowledge and belief. In the event this proposal is approved and begun, I agree to complete the changes in accordance with approved plans in a good and workmanlike manner. I authorize the City of Oklahoma City to enter the property for the purpose of observing and photographing the project for presentations and to ensure consistency between the approved proposal and the completed project.

☒ (If applicable): I authorize my representative to speak for me in matters regarding this application. Any agreement made by my representative regarding this proposal will be binding upon me.

Owner's Signature Cynthia Brundige Date 3/19/21
Name (printed) Cynthia Brundige Organization _____
Address 820 NW 39th Street Phone 4052558667
City, State, Zip Oklahoma City, OK 73118 Email cynthia.brundige@gmail.com

I prefer to be: ☐ Mailed or ☒ Emailed
Representative Signature Jim Oliver Date 3-23-2021
Name (printed) Jim Oliver Organization Classic Contracting
Address 217 NE 36th St Phone 405-613-5688
City, State, Zip OKC, OK 73105 Email classiccontracting@gmail.com

I prefer to be: ☐ Mailed or ☒ Emailed.

Contact: ☐ Owner ☒ Representative

Is Federal money, a federal license or a federal permit included/required for any part of this project? Yes (No)

If yes, what Federal agency? _____

Is the property owner pursuing the Federal Tax Credits for Rehabilitation of income producing historic properties? Yes / No (For questions concerning the federal tax credit program, telephone the State Historic Preservation Office at (405) 522-4479).

NOTE: Specific deadlines apply to submission of additional documentation or requests for appeals. Should your project be continued or denied, you are responsible for compliance with those deadlines.