City of Santa Fe

Land Use Department | Historic Preservation Division

Administrative Approval

THIS IS NOT A CONSTRUCTION PERMIT

DO NOT BEGIN WORK WITHOUT A PERMIT. SUBMIT THIS FORM WITH YOUR CONSTRUCTION PERMIT APPLICATION AND RETAIN A COPY AT THE JOB

Date: August 31, 2023

To: Building Permit Division

From: Ramon Sarason

Be advised that per §14-5.2 SFCC 1987 the work described below at the referenced address does NOT require Historic Districts Review Board approval and is hereby staff-approved as described below. Please allow the applicant to submit for a construction permit(s) for this work if required.

Project Address: 338 ORCHARD DR 1/2, Santa Fe, NM 87501

Case Number: 2023-007294--ADMIN

Contact Name: Travis Dixon

Phone Number: 505-501-4457 **Email:** nmtrstravis@gmail.com

Approved Scope of Work: *Re-roof for the flat sections only. This current roof will be removed, and replacing it with a Polyurethane foam and gravel system. The UV coating color will be Santa Fe Tan.*

Conditions of Approval: *Re-roof structure as submitted with the conditions that there shall be no publicly visible rooftop appurtenances and that no roofing material shall be on the top of the parapets and shall be flashed on interior of parapets.*
There shall be no changes to existing mechanical, line sets, or other rooftop appurtenances at this time.
No other work approved at this time

FURTHER ACTIONS REQUIRED: **PERMIT or PERMIT REVISION**

FINAL HISTORIC INSPECTION

New Mexico Total Roofing Solutions
***P O Box 23229**, Santa Fe, NM 87502*
Phone 505.501.4457

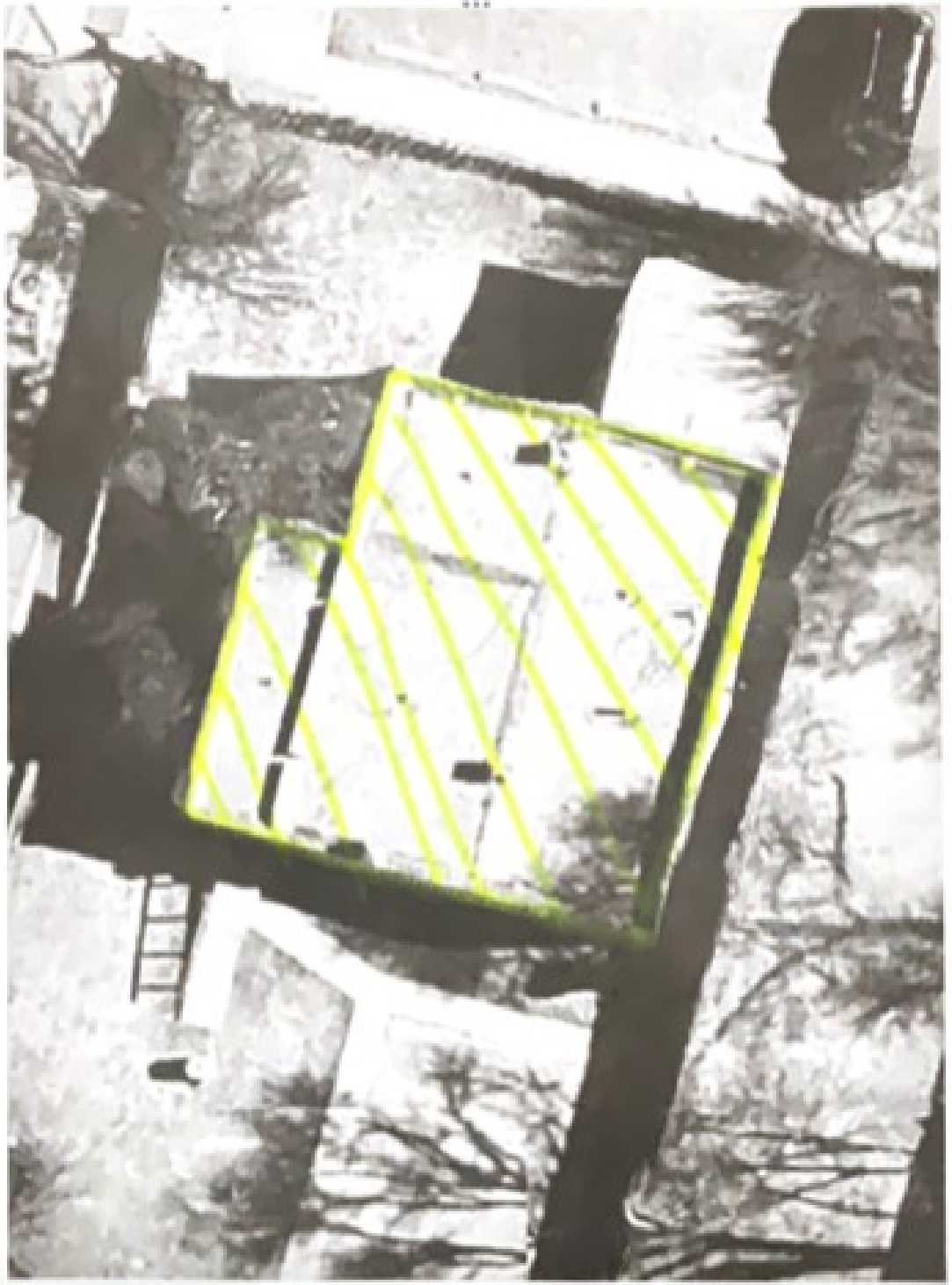
Date: 8/16/2023

City of Santa Fe - Historic Preservation Division:

NM Total Roofing Solutions is requesting an administrative approval for a re-roof at 338 Orchard Drive This re-roof is just for the flat sections only. This current roof needs to be removed, we will be replacing it with a Polyurethane foam and gravel system. The UV coating color will be Santa Fe Tan. The roof we are installing will not be visible. No further work will be done at this time.

Thank you,

If you have any questions please call me
(505)501-4457
Travis Dixon, Owner
New Mexico Total Roofing Solutions, LLC



CITY OF SANTA FE HISTORIC PRESERVATION DIVISION
HISTORIC DISTRICTS APPLICATION

Applicant Information (to be completed by the Applicant)

Date: 8/16/2023 Location of Project: 338 Orchard Drive

Applicant

Name: New Mexio Total Roofing Solutions

Phone: (505) 501-4457 Email: NMTRS Travis@gmal.com

Property Owner

Name: Liz Alarid

Phone: 505-6606609 Email: _____

Proposed Work:

New Roof

At a minimum these materials will be required in addition to this application form:

- Proposal letter stating the details of the scope of work.
- Site plan or map of the project area with the location of the work noted on the map.
- Photos of the current condition of the areas of work.
- Scaled floor plan and elevations if appropriate to your project.

Provide all information digitally to mgsargent@santafenm.gov . See the HPD webpage for detailed instruction. https://www.santafenm.gov/land-use/historic-preservation/hpd-procedures

Examples of Maintenance and Repair Requests:

Re-roof	*Solar	Concrete	Stucco and Paint
Skylights	Brick Coping	Hardscaping	*Windows and Doors
Canales	*Fences, Walls, and Gates	Exterior Lights	Mechanical Equipment

*May require HDRB approval.

Examples of HDRB Requests:
Demolition, Status Review, Removal of Historic Material, Additional Square Footage**, Remodel**, Window and Door Replacement**
**District dependent

Project Details Section (to be completed by Applicant)

Projects may require HDRB approval. Please submit this application form in addition to the list of materials and requirements for HDRB approval, whic can be found at https://www.santafenm.gov/land-use/historic-preservation/hdrb-hearings-and-cases .

New Construction ☐

Sq. Ft. of project: _____

Remodel (Re roof) ☐

Sq. Ft. of project: 724

Construction Cost: $10,500.00

AFIDAVIT AUTHORIZING AGENT/APPLICANT

As the Owner and holder of title of the above listed property I/we authorize the Agent/Applicant to act on my/our behalf to execute this application.

Print Name Elizabeth A/Arid

Signature Elizabeth Arid