

CITY OF OREGON CITY

Historic Review Board

221 MOLALA AVENUE, SUITE 200 OREGON CITY, OREGON 97045 TEL (503) 722-3789 FAX (503) 722-3880

Historic Preservation Renovation Grant Application

Please Print Clearly

Grant Application File # P6 1702 (staff to fill out)					
Date: 5/11/17 Tax Assessor Map and Parcel Number: 3-2E-6AD t1 300 Rose Farm Management Committee / Applicant Name: McLoughlin Memorial Assoc Address: 713 Center Street					
Site Address: 95 Rilance Lane Historic Name: Dr. Daniel Stephenson					
PM Phone Number: <u>503-656-3912</u> E-mail address: <u>guttmcgemsn.com</u>					
Historic Date (if known): C. 1867 Architectural Style: Vornacular					
Previous Grant Approval File #'sTotal Amount					
How did you hear about the program?: from the Community Development Dept.					
Treatment (circle one): Preservation Rehabilitation Restoration Reconstruction					
(From the Secretary of the Interior's Standards for the Treatment of Historic Properties).					
PRESERVATION focuses on the maintenance and repair of existing historic materials and retention of a property's form as it has evolved over time. (Protection and Stabilization have now been consolidated under this treatment.)					
REHABILITATION acknowledges the need to alter or add to a historic property to meet continuing or changing uses while retaining the property's historic character.					
RESTORATION depicts a property at a particular period of time in its history, while removing evidence of other periods.					
RECONSTRUCTION re-creates vanished or non-surviving portions of a property for interpretive purposes.					

Historic Review Board Planning Division Tel: 503-722-3789 Fax: 503-722-3880 PO Box 3040 Oregon City, OR 97045 **Project Description:** Briefly explain the proposed work and the materials to be used. If you are planning to paint your historic building, please attach a paint sample for approval. **NOTE: SOME ALTERATIONS MAY REQUIRE HISTORIC REVIEW AND/OR BUILDING PERMITS.** Please **Contact Staff to determine if your project requires a building permit. (sash repair generally does not.)**

The proposed project to replace two non-historic windows
with windows to match as closely as possible to the
onginals. Sometime in the 80's the orginal windows were
replaced. The installation was done so poorly that the (2)
windows, sash and frame have deteriorated and all
falling out. The non-conforming windows will need to
be somuled and entire support structure rebuilt.
Historic Significance: Describe how the project will enhance the historical nature of, or preserve renovate or rebuild, the historical aspects of the structure.
The Dr. Daniel Stephenson House, one of Organ City's first
dentist, was originally located at 13/14th & Main Streets Mrs.
Ruth Mc Binde Powers purchased the house and moved it next

Historical Documentation: Indicate any physical evidence such as old paint lines, original moldings, historic photographs, etc. that support your request to alter the exterior.

The attached photos attempt to document the
damage. The rehab work will remove the
non-conforming windows. The existing window frames
are approximalally in same configuration as the
maltered historic windows.
The Rose Farm Management Committee solicited proposals
From Borders Construction, Jim Ounish Construction (pre-
vous grant contractor) and John Huffman, we were only
able to get one bid, due to everyone being very busy.

Photographs: Submit a "before" photo of the project site. An "after" photograph is required upon completion of the project. **Digital photos should be submitted on disk or via an e-mail attachment.**

Project Costs: Attach the contractor's bids, or a list of detailed estimates for materials. (Example: Paint: 10 gallons @ \$25/each = \$250; Siding (drop lap): 600 feet, 1" x 6" @ \$1/foot = \$600). Eligible labor costs are limited to those performed by a licensed contractor.

Materials and Labor

Cost Estimate: \$2,486.83

Approximate Project Total: 6,579.33

Total grant amount requested: <u>as much as</u>

reasonably available

Project Scheduling:
Beginning Date: July 1, 2017 Completion Date: October 2017
Since funding is limited, you must contact the Historic Review Board if you cannot start your project within 90 days of the scheduled beginning date to apply for a beginning time extension. Projects must be completed within 180 days of when the grant is awarded.
If you are approved for a Preservation Grant, you must contact the Board when you actually begin the proposed work, and when you finish the project. Preservation Staff will inspect the work when the project is completed.
I have read the Secretary of the Interior's Standards for the Treatment of Historic Properties and the Oregon City Design Guidelines for Exterior Alterations and agree to do the project as submitted and approved within six months of the application. I will notify the Board when I begin the project and when the project is completed.
Signature: Date:

This grant program has been funded with the assistance of a matching grant-in-aid from the Oregon State Historic Preservation Office and the National Park Service. Regulations of the U.S. Department of the Interior strictly prohibit unlawful discrimination on the basis of race, color, national origin, age or handicap. Any person who believes he or she has been discriminated against in any program, activity, or facility operated by a recipient of Federal assistance should write to: Office of Equal Opportunity, National Park Service, 1849 C Street, NW, Washington, D.C. 20240.

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RENOVATION GRANT CHECK LIST

(to be completed by staff)

	Application submitted (Date:)
	W9 Submitted
	Historic eligibility verified
	Ownership verified
	HRB review of request (date):
	Letter sent to the applicant of HRB action
	Approved
	Denied (reason for denial): Additional information requested:
	Work begun (date):
	Work Completed (date):
	Follow-up inspection. Date:
Total cost of	project: \$
Grant award	ed: \$
Amount due	owner: \$Check sent (Date:)
(Not to excee	ed either the project costs or the grant awarded, whichever is the lesser).

Project Address:	1 7	WAY! 1 W				
Window #	keyed to site	Window Location	n:			
тар				0 1	т.	
CONDITON	OCTOL TAY!		Excellent	Good	Fair	Poor
1. Overall Conditio		OW				
2. Condition Of The		11				
3. Condition Of The Frame And Sill						
4. Condition Of The Sash						
5. Condition of The Rails						
6. Condition of The Stiles						
7. Condition of The			-	-		
8. Condition of Har						
9. Glazing Problem 10. Other:	5					
			1	1 3		1

PLEASE PROVIDE AN INTERIOR/EXTERIOR OR CONTEXT PHOTO FOR EACH WINDOW

Historic Review Board Planning Division Tel: 503-657-0891 Fax: 503-657-7892 1. Photo Description

2. Photo Description:

BORDERS CONSTRUCTION, LLC

CCB 194796

P.O. BOX 3098

OREGON CITY, OR 97045

(503) 522-2655

April 4, 2017

McLoughlin Memorial Association

c/o Rose Farm Management Committee

PROPOSAL

LOCATION WHERE WORK TO BE PERFORMED:

Daniel Stevenson House

915 Rilance Drive

Oregon City, OR 97045

Remove two (2) existing 3.0' x 5.0' wood sash windows; replace with Jeldwen windows to match¹, finish and install new interior trim to match existing²; trim exterior and paint to match

Labor	\$700.00
Materials:	
Windows (Per quote, Irvington Building Supply)	\$1,636.83
Paint	75.00
Trim	<u>75.00</u>
Total	\$2,486.83

² Contractor will be required to see interior to determine exact cost of trim

¹ This does not include expense for any dryrot repair which may be required

All material is guaranteed to be as specified, ordered through Irvington Building Materials, and the above work to be performed in a substantial workmanlike manner for a total of Two Thousand Four Hundred Eighty Six Dollars and 83/100 with payments to be made as follows: \$1,700.00 up acceptance of bid, \$786.83, upon completion of work.

In the event dryrot or other damage is exposed during the removal and installation of the windows, repair shall be billed at the rate of \$50.00 per hour labor plus materials.

Topan shall be blilled at the rate of \$50.00 per hour labor plus materials.				
DATED this day of April, 2017.				
	Respectfully submitted,			
	/s/ Cindy Borders			
Accepted by:				

Irvington Building Supply

619 SE 12th Ave Portland, OR 97214 Phone: (971) 279-4210 JW JELD WEN

QUOTE BY: Wade Byers SOLD TO: Mike Borders

SHIP TO:

QUOTE #: JIBS00707

Phone: 503-522-2655

PROJECT NAME: Rose Farm

PO#:

REFERENCE:

Ship Via: Ground/Next Truck				
LINE NO. LOCATION SIZE INFO	BOOK CODE DESCRIPTION	NET UNIT PRICE	QTY	EXTENDED PRICE
Line-1				
Rough Opening: 33 3/4 X 60 3/4	Frame Size: 33 X 60			
Viewed from Exterior. Scale: 1/4" = 1'	(Outside Casing Size: 42 5/8 X 65 5/16) W-2500 Wood Double Hung, Auralast P Primed Exterior, Natural Interior, 5 1/2 Flat Casing, Standard Sill Nosing, 5 1/2 Jamb, With-Plow White Jambliner, Compression White Hardware, US National-WDMA/ASTM, PG 25 Insulated Low-E 366 Annealed Glass, National-WDMA/ASTM, PG 25	ine, on Jambliner & N o Preserve Film, ad Int BAR, Prim o(s) 3 Wide 2 Hig	Argon Fi ed Wood h Top, 3	iled, i Wide

Line-2

Rough Opening: 33 3/4 X 60 3/4



Viewed from Exterior. Scale: 1/4" = 1'

Frame Size: 33 X 60

(Outside Casing Size: 42 5/8 X 65 5/16),

W-2500 Double Hung Product, Wood Fixed Auralast Pine,

Insash

Primed Exterior, Natural Interior,

5 1/2 Flat Casing, Standard Sill Nosing,

5 1/2 Jamb,

US National-WDMA/ASTM, PG 30,

Insulated Low-E 366 Annealed Glass, No Preserve Film, Argon Filled, 7/8" Bead SDL w/Perm Wood Trad'l. Bead Int BAR, Primed Wood

SDL, Silver Shadow Bar, Colonial 3 Wide 4 High

U-Factor: 0.28, SHGC: 0.19, VLT: 0.45, CPD: JEL-N-737-01548-00001

PEV 2016.3.1.1661/PDV 6.340 (12/07/16) CW

\$881.87

\$754.96

\$881.87

\$754.96

Total: **Total Units:** \$1,636.83

QQ-2.20.900.1902 cust-054117

Quote Date: 3/6/2017

Page 1 of 2(Prices are subject to change.)

JIBS00707 - 3/6/2017 - 3:56 PM

Drawings are for visual reference only and may not be to exact scale. All orders are subject to review by JELD-WEN

Last Modified: 3/6/2017



Protect yourself when you choose JELD-WEN® AuraLast® pine products backed by a limited lifetime warranty against wood rot and termite damage.

Note: This quote is in effect for 30 days.

All items are special order and are NOT Returnable Or Refundable.

To place an order, sign, date and return this quote.

By signing below, you accept the order and agree to pay for the order in full.

Jeld-Wen products are FOB our shop in Portland, OR.

X		
Date		







