



32325 Franklin Road, Franklin, Michigan 48025

FAX: (248) 626-0538 | OFFICE: (248) 626-9666

[www.franklin.mi.us](http://www.franklin.mi.us)

## **HISTORIC DISTRICT COMMISSION REGULAR MEETING**

**Wednesday, December 7, 2022, 7:00 P.M**  
**At the Franklin Village Hall, Broughton House**  
**32325 Franklin Road, Franklin, MI**

### **A G E N D A**

- I. Meeting Called to Order
- II. Roll Call
- III. Adoption of Agenda
- IV. Adoption of Minutes
  - A. Regular Meeting of November 2, 2022
- V. Public Comments
- VI. New Business
  - A. Consider 32740 Franklin Road Replacement of Rotten Board in Front of Building
  - B. Consider 32734 Franklin Road Replacement of Gutters and Siding
- VII. Adjournment

Posted: November 30, 2022 William Dinnan, Building Official/Historic District Commission Facilitator

### **POSTED IN ACCORDANCE WITH PUBLIC ACT 267 (OPEN MEETINGS ACT)**

The Village of Franklin will provide necessary, reasonable auxiliary aids and services to individuals with disabilities requiring such services. All requests must be made to the Village Clerk at least five (5) business days before a meeting. Individuals with disabilities requiring auxiliary aids or services should contact the Village of Franklin in writing at 32325 Franklin Road, Franklin, MI 48025, or by calling the Village Clerk's Office at (248) 626-9666.

**VILLAGE OF FRANKLIN  
HISTORIC DISTRICT COMMISSION  
REGULAR MEETING  
WEDNESDAY, November 2, 2022, 7:00 P.M.  
32325 Franklin Road, Franklin, Michigan 48025**

**I. MEETING CALLED TO ORDER**

The Regular Meeting of the Historic District Commission was called to order by Gary Roberts, Chairman, at 7:01 P.M.

**II. ROLL CALL**

Present: Alek Kokoszka, Gary Roberts, Gayle Timmis, Alex Stchekine, Laura Witty

Absent: Mike Brassfield and Jill Wilke

Also Present: Roger Fraser, Village Administrator, Dana Hughes, Village Clerk

**III. ADOPTION OF AGENDA**

**Motion by Timmis, seconded by Kokoszka to approve the agenda, as amended to include Item "C" an update on Notice of Violation for 32767 Franklin Road.**

**Ayes: Kokoszka, Stchekine, Timmis, Witty, Roberts**

**Nays: None**

**Motion carried.**

**IV. ADOPTION OF THE MINUTES**

**A. Regular Meeting of September 7, 2022**

**Motion by Kokoszka, seconded by Wilke to approve the minutes of the Regular Meeting of July 6, 2022, with corrections.**

**Ayes: Kokoszka, Stchekine, Timmis, Witty, Roberts**

**Nays: None**

**Motion carried.**

**V. PUBLIC COMMENTS**

No Public Comments

**VI. NEW BUSINESS**

**A. Consider 32620 Franklin Rd. Shingle Tear-off & Re-Shingling of Roof**

The two requests before the Historic District Commission are for 32620 Franklin Road. The first is for a roof shingle tear-off and re-shingling. A sample was provided of the black shingle, which is a dimensional shingle, almost identical to what they currently have. The second request to replacement of bricks on the chimney. The sample bricks, which are similar to the current bricks on the chimney, were also provide for the Historic District Commission's review.

**Motion by Timmis, seconded by Stchekine to approve the application received October 4<sup>th</sup>, 2022, for this shingle removal and replacement, including the flashing for the building located at 32620 Franklin Road. These shingles shall be as presented at the meeting which are CertainTeed Moire Black in color, which match the previously existing roofing shingles and find it is in accordance with the Secretary of Interior Standards for Rehabilitation #9.**

**Ayes: Kokoszka, Stchekine, Timmis, Witty, Roberts**

**Nays: None**

**Motion carried.**

**B. Consider 32620 Franklin Road Replacement of Bricks on Chimney**

**Motion by Stchekine, seconded by Kokoszka to approve the motion to consider the replacement of bricks on the chimney 32620 Franklin Road the bricks as presented, as I find it is in accordance with the Secretary of Interior Standards for Rehabilitation #9.**

**Ayes: Kokoszka, Stchekine, Timmis, Witty, Roberts**

**Nays: None**

**Motion carried.**

**C. Update on Notice of Violation on 32767 Franklin Road**

**Discussion:**

Fraser stated that the Village has talked with the architect, Bill Finnicum. Has tried to get a hold of the property owner and it appears as though they have run out of momentum. They are not currently working out of the dentist office, but just occasionally. The Building Official has not been able to get any response from them either. Building Official to follow up.

**VIII. ADJOURNMENT**

**Motion by Roberts, seconded by all to adjourn the meeting.**

The meeting was adjourned at 7:11 P.M.

Submitted,

---

Dana Hughes, Village Clerk



# HISTORIC DISTRICT APPLICATION

INSPECTIONS . . . . . (248) 626-1601

DATE STAMP

RECEIVED

OCT 31 2022

VILLAGE OF FRANKLIN, MI

32325 Franklin Rd • Franklin MI 48025-1199 • Phone (248) 626-9666 • Fax (248) 626-0538

The undersigned hereby applies for a permit to (describe project)

Replacement of rotten board & gutters (Front of Building)

Current market value of project \$ 6,500.-

SUBMIT CHECKLIST WITH APPLICATION

<b>I. LOCATION OF PROJECT</b>		Historic District ? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		Zoning District	
Address: <u>32740 FRANKLIN RD</u>					
Village: <u>FRANKLIN</u>		Township: <u>SOUTHFIELD</u>		County: <u>OAKLAND</u>	Zip Code: <u>48025</u>
Between <u>13 MILE</u> And <u>14 MILE</u>					
<b>II. PARCEL IDENTIFICATION #</b>					
<b>A. OWNER OR LESSEE</b>					
Name: <u>JUNG HEE KIM</u>				Telephone No: <u>(248) 626-1616</u>	
Address: <u>32740 FRANKLIN RD</u>		City: <u>W. BLOOMFIELD</u>		State: <u>MI</u>	Zip Code: <u>48323</u>
<b>B. ARCHITECT OR ENGINEER</b>					
Name:				Telephone No:	
Address:		City:		State:	Zip Code:
License No:				Expiration Date:	
<b>C. CONTRACTOR</b>					
Name:				Telephone No: <u>(248) 802-3900</u>	
Address: <u>5600 W. Maple Rd</u>		City: <u>W. BLOOMFIELD</u>		State: <u>MI</u>	Zip Code: <u>48322</u>
License No: <u>2101179929</u>				Expiration Date:	
Federal Employer Number or Reason for Exemption:					
Worker's Comp Insurance Carrier or Reason for Exemption:					
MESC Employer Number or Reason for Exemption:					
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>					
<b>A. TYPE OF IMPROVEMENT</b>					
<input type="checkbox"/> New Building <input type="checkbox"/> Addition / Remodel <input type="checkbox"/> Demolition <input type="checkbox"/> Property <input type="checkbox"/> Other <u>replacement of rotten board &amp; gutters</u>					
<b>B. REVIEW(s) TO BE PERFORMED</b>					
<input type="checkbox"/> Building / Trades <input type="checkbox"/> Engineering <input type="checkbox"/> Arborist <input type="checkbox"/> Legal <input type="checkbox"/> Other					



**IV. PERMIT PROPOSAL****A. RESIDENTIAL BUILDING – show most recent use**

- ☐ One Family                      ☐ Detached Condominium - number of units \_\_\_\_\_  
☐ Attached Garage                      ☐ Detached Garage                      ☐ Other (describe) \_\_\_\_\_

**B. NON-RESIDENTIAL BUILDING – show most recent use**

- ☐ Church, Religious                      ☐ Public Utility                      ☐ Restaurant  
☐ Service Station                      ☐ School, Library, Educational                      ☐ Grocery  
☐ Office, Bank, Professional                      ☐ Store, Mercantile                      ☐ Other (describe) \_\_\_\_\_

**C. PROPERTY – Describe proposal in detail** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. SELECTED CHARACTERISTICS FOR BUILDING PERMIT****A. PRINCIPAL TYPE OF FRAME**

- ☐ Masonry, Wall Bearing                      ☐ Wood Frame                      ☐ Structured Steel  
☐ Reinforced Concrete                      ☐ Other (describe) \_\_\_\_\_

**B. PRINCIPAL TYPE OF HEATING FUEL**

- ☐ Gas                      ☐ Oil                      ☐ Electricity                      ☐ Coal                      ☐ Other \_\_\_\_\_

**C. TYPE OF SEWAGE DISPOSAL**

- ☐ Pressure Sewer System                      ☐ Septic System

**D. TYPE OF WATER SUPPLY**

- ☐ Public or Private Company                      ☐ Private Well or Cistern

**E. TYPE OF MECHANICAL**

- Will there be air conditioning?    ☐ yes    ☐ no                      Will there be an elevator?    ☐ yes    ☐ no

**F. DIMENSIONS**

First Floor (sq ft) \_\_\_\_\_                      Garage / Accessory (sq ft) \_\_\_\_\_  
Second Floor (sq ft) \_\_\_\_\_                      Total Building Area (sq ft) \_\_\_\_\_  
Basement (sq ft) \_\_\_\_\_                      Total Land Area (sq ft) \_\_\_\_\_

**G. NUMBER OF OFF-STREET PARKING SPACES**

Enclosed \_\_\_\_\_                      Outdoors \_\_\_\_\_

# **VI. APPLICANT INFORMATION:**

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information:

Name: **JUNG HEE KIM** Telephone No. **(248) 626-1616**  
 Address: **32740 Franklin** City: **Franklin** State: **MI** ZIP: **48025**  
 Federal ID no. (if applicable)

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who perform work on a residential building or a residential structure. Violators of Section

Signature of Applicant

Application Date

## **VII. FOR INTERNAL USE ONLY**

	REQUIRED	APP / REJ	DATE	BY
A ~ BUILDING PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
B ~ CULVERT PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
C ~ FENCE PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
D ~ FLOODPLAIN PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
E ~ LANDFILL PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
F ~ SOIL EROSION PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
G ~ TREE REMOVAL PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
H ~ WETLANDS PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
I ~ HISTORIC DISTRICT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
J ~ ZONING BOARD **	<input type="checkbox"/> Yes <input type="checkbox"/> No			

\*\* Zoning District

Required Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back \_\_\_\_\_

Proposed Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back \_\_\_\_\_

## **VIII. VALIDATION**

Approved by:

DATE STAMP

(signature)

VILLAGE OF FRANKLIN BUILDING OFFICIAL

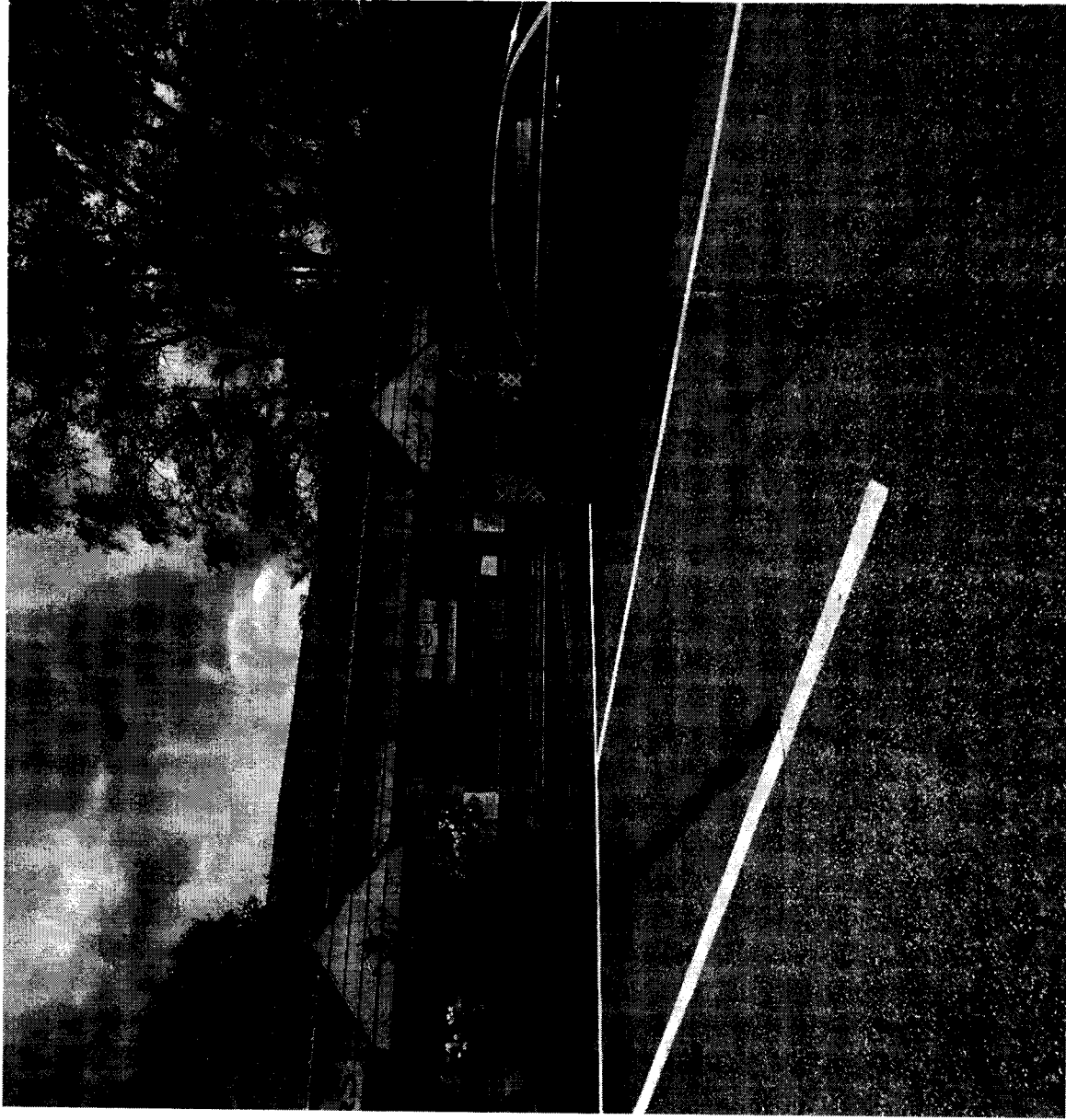
### HISTORIC DISTRICT CHECKLIST

#### **14 COPIES EACH OF THE FOLLOWING:**

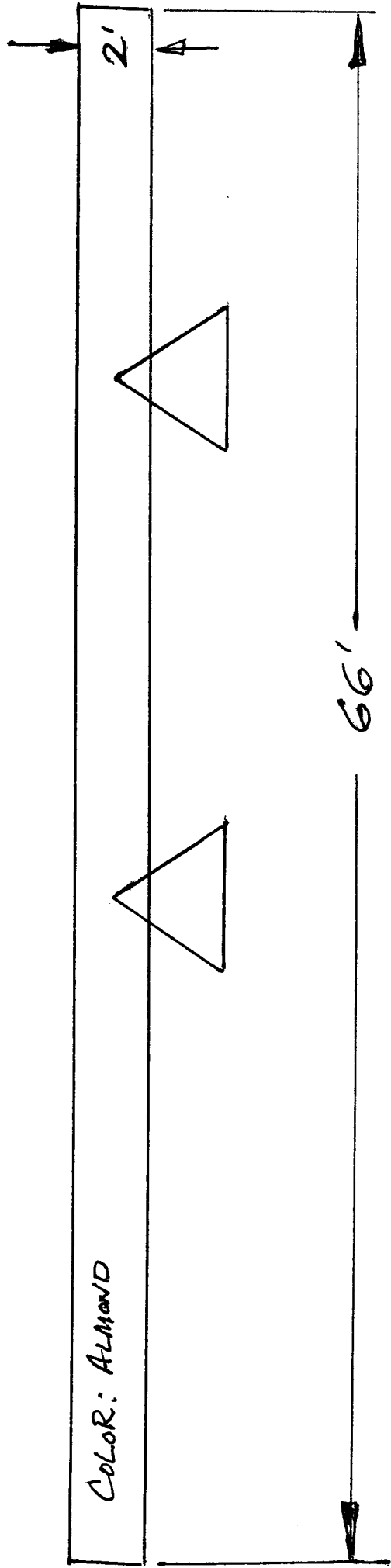
- \_\_\_ Completed Permit Application
  - \_\_\_ Proof of ownership (ie: copy of title insurance policy)
  - \_\_\_ Homeowner's Permit requires signed and dated Home Owner's Affidavit on file
  - \_\_\_ Builder's Registration – copy builder's license and driver's license on file
- \_\_\_ Copy of certified plot plan indicating:
  - \_\_\_ Dimensions of all property lines – indicate any easements
  - \_\_\_ Dimensions of existing and proposed work
  - \_\_\_ Setback dimensions of all yards
  - \_\_\_ Notation of any historic or natural resources on site
  - \_\_\_ Location of well and septic system
- \_\_\_ A descriptive text of the proposed work to be done
- \_\_\_ Application complies with Zoning Ordinance requirements?
  - \_\_\_ yes
  - \_\_\_ no – complete Zoning Appeals Application for review
- \_\_\_ Photographs of the existing conditions and/or structures being considered
- \_\_\_ Provide detail drawings, moldings, profiles, color samples, materials (etc.) to be used
- \_\_\_ Such further information as the Commission or Building Official may require

#### **PLEASE NOTE:**

- Applicant must be present at Historic District Commission meeting
- Permits must be obtained after Historic District Commission approval
- Applicant shall be responsible for 100% of all consultant fees incurred by the Village PLUS a 10% administration fee.



FRANKLIN PLAZA





# HISTORIC DISTRICT APPLICATION

INSPECTIONS . . . . . (248) 626-1601

DATE STAMP

32325 Franklin Rd • Franklin MI 48025-1199 • Phone (248) 626-9666 • Fax (248) 626-0538

The undersigned hereby applies for a permit to (describe project)

Current market value of project \$

64800<sup>00</sup>

**SUBMIT CHECKLIST WITH APPLICATION**

<b>I. LOCATION OF PROJECT</b>		Historic District ? <input type="checkbox"/> yes <input type="checkbox"/> no		Zoning District	
Address: 32734 Franklin					
Village: FRANKLIN		Township: SOUTHFIELD		County: OAKLAND	
Between 14 Mile		And Franklin Rd			
<b>II. PARCEL IDENTIFICATION #</b>					
<b>A. OWNER OR LESSEE</b>					
Name: Jung Hee Kim				Telephone No: 248-602-1616	
Address: 32734 Franklin Ct		City: Ad Franklin		State: MI Zip Code: 48025	
<b>B. ARCHITECT OR ENGINEER</b>					
Name:				Telephone No:	
Address:		City:		State: Zip Code:	
License No:				Expiration Date:	
<b>C. CONTRACTOR</b>					
Name: Renaissance Contracting				Telephone No: 248-802-3900	
Address: 24800 Five Mile		City: Redford		State: MI Zip Code: 48239	
License No: 262100616				Expiration Date: 05/31/2004	
Federal Employer Number or Reason for Exemption: 80-1545494					
Worker's Comp Insurance Carrier or Reason for Exemption: Crum & Foster					
MESC Employer Number or Reason for Exemption:					
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>					
<b>A. TYPE OF IMPROVEMENT</b>					
<input type="checkbox"/> New Building <input type="checkbox"/> Addition / Remodel <input type="checkbox"/> Demolition <input type="checkbox"/> Property <input type="checkbox"/> Other					
<b>B. REVIEW(s) TO BE PERFORMED</b>					
<input checked="" type="checkbox"/> Building / Trades <input type="checkbox"/> Engineering <input type="checkbox"/> Arborist <input type="checkbox"/> Legal <input type="checkbox"/> Other					

<b>IV. PERMIT PROPOSAL</b>	
<b>A. RESIDENTIAL BUILDING – show most recent use</b>	
<input type="checkbox"/> One Family	<input type="checkbox"/> Detached Condominium - number of units _____
<input type="checkbox"/> Attached Garage	<input type="checkbox"/> Detached Garage <input checked="" type="checkbox"/> Other (describe) <u>Commerical</u>
<b>B. NON-RESIDENTIAL BUILDING – show most recent use</b>	
<input type="checkbox"/> Church, Religious	<input type="checkbox"/> Public Utility
<input type="checkbox"/> Service Station	<input type="checkbox"/> School, Library, Educational
<input type="checkbox"/> Office, Bank, Professional	<input type="checkbox"/> Store, Mercantile
<input type="checkbox"/> Restaurant	
<input type="checkbox"/> Grocery	
<input type="checkbox"/> Other (describe) _____	
<b>C. PROPERTY – Describe proposal in detail</b> <u>Gutters + Siding</u>	
<b>V. SELECTED CHARACTERISTICS FOR BUILDING PERMIT</b>	
<b>A. PRINCIPAL TYPE OF FRAME</b>	
<input type="checkbox"/> Masonry, Wall Bearing	<input type="checkbox"/> Wood Frame
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Structured Steel
<input type="checkbox"/> Other (describe) _____	
<b>B. PRINCIPAL TYPE OF HEATING FUEL</b>	
<input type="checkbox"/> Gas	<input type="checkbox"/> Oil
<input type="checkbox"/> Electricity	<input type="checkbox"/> Coal
<input type="checkbox"/> Other _____	
<b>C. TYPE OF SEWAGE DISPOSAL</b>	
<input type="checkbox"/> Pressure Sewer System	<input type="checkbox"/> Septic System
<b>D. TYPE OF WATER SUPPLY</b>	
<input type="checkbox"/> Public or Private Company	<input type="checkbox"/> Private Well or Cistern
<b>E. TYPE OF MECHANICAL</b>	
Will there be air conditioning? <input type="checkbox"/> yes <input type="checkbox"/> no      Will there be an elevator? <input type="checkbox"/> yes <input type="checkbox"/> no	
<b>F. DIMENSIONS</b>	
First Floor (sq ft) _____	Garage / Accessory (sq ft) _____
Second Floor (sq ft) _____	Total Building Area (sq ft) _____
Basement (sq ft) _____	Total Land Area (sq ft) _____
<b>G. NUMBER OF OFF-STREET PARKING SPACES</b>	
Enclosed _____	Outdoors _____



**VI. APPLICANT INFORMATION:**

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information:

Name: Sean Davis Telephone No. 248-800-3900  
 Address: 24800 Five Mile City: Dedford State: Mi ZIP: 48239  
 Federal ID no. (if applicable) 80-1545494

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who perform work on a residential building or a residential structure. Violators of Section

Sean Davis

11/07/2020

Signature of Applicant

Application Date

**VII. FOR INTERNAL USE ONLY**

	REQUIRED	APP / REJ	DATE	BY
A ~ BUILDING PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
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G ~ TREE REMOVAL PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
H ~ WETLANDS PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
I ~ HISTORIC DISTRICT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
J ~ ZONING BOARD **	<input type="checkbox"/> Yes <input type="checkbox"/> No			

\*\* Zoning District

Required Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back

Proposed Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back

**VIII. VALIDATION**

DATE STAMP

Approved by:

(signature)

VILLAGE OF FRANKLIN BUILDING OFFICIAL

### HISTORIC DISTRICT CHECKLIST

#### 14 COPIES EACH OF THE FOLLOWING:

- ☒ Completed Permit Application
  - ☒ Proof of ownership (ie: copy of title insurance policy)
  - ☒ Homeowner's Permit requires signed and dated Home Owner's Affidavit on file
  - ☒ Builder's Registration – copy builder's license and driver's license on file
- ☐ Copy of certified plot plan indicating:
  - ☐ Dimensions of all property lines – indicate any easements
  - ☐ Dimensions of existing and proposed work
  - ☐ Setback dimensions of all yards
  - ☐ Notation of any historic or natural resources on site
  - ☐ Location of well and septic system
- ☐ A descriptive text of the proposed work to be done
- ☐ Application complies with Zoning Ordinance requirements?
  - ☐ yes
  - ☐ no – complete Zoning Appeals Application for review
- ☐ Photographs of the existing conditions and/or structures being considered
- ☐ Provide detail drawings, moldings, profiles, color samples, materials (etc.) to be used
- ☐ Such further information as the Commission or Building Official may require

Meeting Every  
Month! Dec 7th

#### PLEASE NOTE:

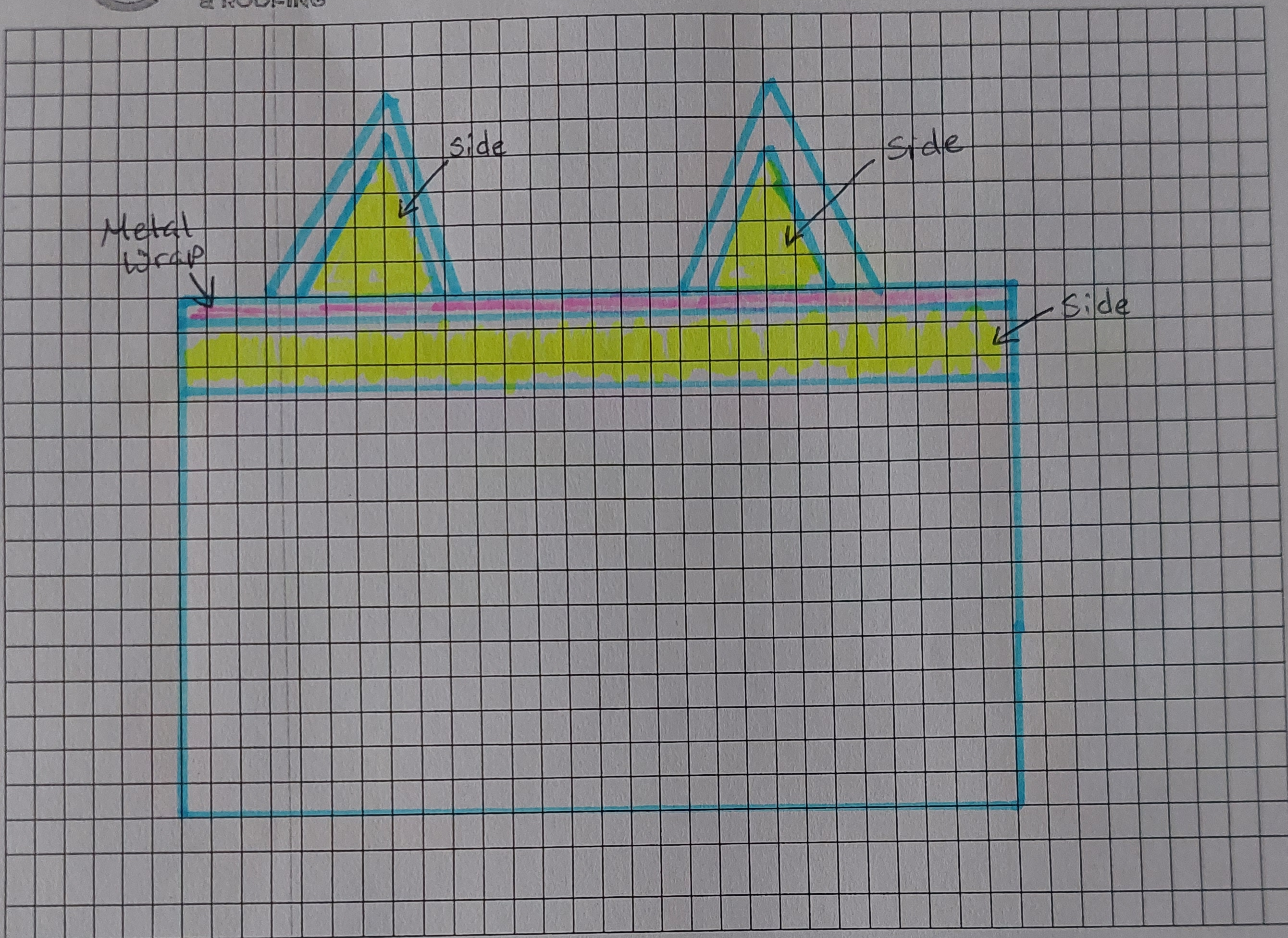
- Applicant must be present at Historic District Commission meeting
- Permits must be obtained after Historic District Commission approval
- Applicant shall be responsible for 100% of all consultant fees incurred by the Village PLUS a 10% administration fee.





Homeowner Name: Jung Hee Kim  
Address: 3243 Woodview Ct, West Bloomfield, MI 48324  
Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_

[www.ren-contracting.com](http://www.ren-contracting.com)



Comment(s):

Remove All Hardy And Replace With Vinyl (\*Siding Only\*).  
\*No Soffit work\* Wrap All Fascia. \*Work To Be Completed  
On The Front Only\*

Antenna/Satellite Dish Comment(s): \_\_\_\_\_

Marketsharp

- ☐ Resulted /updated
- ☐ attachments





5600 West Maple Rd Suite A-110, West Bloomfield, MI 48322  
24800 5 Mile Road, Suite A-170, Redford, MI 48239  
Phone: 248-802-3900 / Website: ren-contracting.com

State of Michigan  
Residential Builder  
License # 2101179929



PREFERRED  
CONTRACTOR

Page \_\_\_\_\_ of \_\_\_\_\_

First Jung Hee Last Kim Date \_\_\_\_\_  
Job Address 3243 Woodview Lake City West Bloomfield  
Home 248-626-1616 Best 9-5# \_\_\_\_\_  
Cell (Mr.) \_\_\_\_\_ Work (Mr.) \_\_\_\_\_  
Cell (Mrs.) 248-719-6229 Work (Mrs.) \_\_\_\_\_  
Email (Mr.) \_\_\_\_\_ Email (Mrs.) \_\_\_\_\_  
Billing Address (if different from above) \_\_\_\_\_

<b>Roof Style</b> <input type="checkbox"/> Gable <input type="checkbox"/> Gambrel <input type="checkbox"/> Hip <input type="checkbox"/> Mansard Shingle Color _____ Drip Edge _____ <input type="checkbox"/> Flat (Flintlastic) Color _____	<b>Home</b> # Sq. Ft. _____ Tear off Only <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Pitch _____	<b>Garage</b> # Sq. Ft. _____ Tear off Only <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Pitch _____	<b>Home &amp; Garage Attached</b> # Sq. Ft. _____ Tear off Only <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Pitch _____
--	--	--	--

### Economy Pkg.

- ☐ XT25 3 tab shingle
- ☐ Oakridge shingle
- ☐ 3' Ice and water shield
- ☐ Generic felt paper
- ☐ 750 can vents only
- ☐ Economy drip edge
- ☐ No wood included
- ☐ 30 year manufacturers warranty
- ☐ 10 year labor warranty

\_\_\_\_ (Initials)

### Good Pkg.

- ☐ Duration shingle
- ☐ Designer color option + \$400
- ☐ 3' ☐ 6' Ice & water shield
- ☐ Generic synthetic underlayment
- ☐ Omni vent ☐ 750 can vent
- ☐ No intake ventilation included
- ☐ Standard drip edge
- ☐ 100' wood included
- ☐ Lifetime manufacturers warranty
- ☐ 12 year labor warranty

\_\_\_\_ (Initials)

### Better Pkg.

- ☐ Northgate shingle (available designer shingle upgrade)
- ☐ Berkshire
- ☐ Duration Flex
- ☐ Belmont
- ☐ Carriage House
- ☐ Presidential
- ☐ No wood included
- ☐ Remove edgevent
- ☐ Total protection warranty

\_\_\_\_ (Initials)

### Best Pkg.

- ☐ Metal roof style \_\_\_\_\_ Color: \_\_\_\_\_
- ☐ 6' Ice and water shield
- ☐ Owens Corning synthetic underlayment
- ☐ Shinglevent 2/750 can vents
- ☐ Edgevent included if needed (includes baffles)
- ☐ Oversize drip edge
- ☐ 200' wood included
- ☐ Lifetime fully transferable guarantee on all parts, labor and materials
- ☐ 5 star sure start protection plan (only available with matterhome)

\_\_\_\_ (Initials)

### Gutters

- ☐ INSTALL NEW  
Color: \_\_\_\_\_
- ☐ 5" # \_\_\_\_\_ 1 story downspouts
- ☐ 6" # \_\_\_\_\_ 2 story downspouts

\_\_\_\_ L. Ft. of Gutters  
\_\_\_\_ L. Ft. of Gutter Guards

- ☐ Standard Installation (Hidden Hangers)
- ☐ Straps (No Fascia)
- ☐ Wedges (Standard Fascia)

- ☐ Edgevent Smartvent
- ☐ Vented drip edgevent

Down: 3750  
When Complete: 3750  
Total: \$7,500.00

COMMENTS: Remove and Repture gutter and Downspouts on exterior  
house and garage with leaf guards and splash guards as needed  
Replace 1 piece of soffit on front porch  
Replace rotten lxs and soffit on front balconys  
Taxes per mites clean up back away all work debris

The customer(s) ("Owner(s)") listed above hereby jointly and severally agree to purchase the goods and/or services listed below, in accordance with the price and terms described on the front and the reverse of this agreement ("Agreement"), and Owner(s) has requested that such goods and/or services be installed or provided at Owner's address listed below. Renaissance Contracting & Roofing ("Contractor") hereby agrees to install or cause to be installed the products and/or services listed in this Agreement. Owner(s) agrees to sign a completion certificate upon completion of the installation of the goods. This Agreement represents a cash sale of goods and/or services. Owner(s) agrees to pay in cash the cost of the goods and/or services purchased as described below, with full payment due upon substantial completion of the job, regardless of timing or approval of any financing Owner(s) may seek for the purchase.

**We do not charge for bad wood up front.** Rotted wood and/or cedar shake is beyond our control. There will be an extra charge for 4x8 sheet OSB wood = \$75 per sheet at 3 sheet per square or extra charge for 1x6 = \$7.50/ft.

Estimated to be \_\_\_\_\_, if wood is necessary. This is addition to price.

x \_\_\_\_\_ (Customer Initials)

Ventilation to meet/exceed code requirement.

For the total cash price of	\$ <del>12,000.00</del> <del>10,000.00</del>
Buyers down payment amount of (50% Deposit Req.)	\$ <del>6,000.00</del> <del>5,000.00</del>
Cash to be paid upon Substantial Completion	\$ <del>6,000.00</del> <del>5,000.00</del>
Amount to be financed by Financial Co. upon Substantial Completion	\$

### Down Payment and/or Final Payment in form of:

☐ Cash ☐ Check# \_\_\_\_\_ ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name on CC \_\_\_\_\_

Credit Card # \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ 3 or 4 digit CPU Code# \_\_\_\_\_

**Buyers Right to Cancel:** You, the Buyer(s), may cancel this transaction at any time prior to midnight of the third business day after the date of this transaction. See the accompanying Notice of Cancellation form for an explanation of this right. Additionally, the seller is prohibited from having an independent courier service or other third party pick up your payment at your residence before the end of the 3-business-day period in which you can cancel the transaction.

IN WITNESS WHEREOF the parties have here unto signed their name(s) this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
MICHIGAN HOME SOLICITATION SALES ACT rescission cut off date: \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

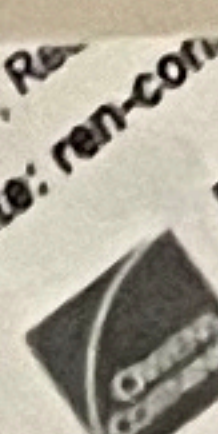
Owner(s) agrees that this Agreement, front and reverse, constitutes the entire understanding between the parties, and there are no verbal understandings, changes or modifying any of the terms of this Agreement. This Agreement may not be changed or its terms modified or varied in any way unless such changes are in writing and signed by both Owner(s) and the Contractor. Owner(s) hereby acknowledge that Owner(s) has read the front and reverse of this Agreement and has received a completed, signed and dated copy of this Agreement, including the two accompanying Notice of Cancellation forms, on the date first written above. Owner(s) also acknowledge that he or she was orally informed of his or her right to cancel this transaction.

Owner x

Owner x

Witnessed by Salesperson (Sign & Print)

5600 West Maple Rd Suite A-110, West Bloomfield, MI 48322  
24800 5 Mile Road, Suite A-170, Redford, MI 48239  
Phone: 248-802-3900 / Website: ren-contracting.com



PREFERRED  
CONTRACTOR

State of Michigan  
Residential Builder  
License # 2101179929





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NAIL & SPA

32744

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MANICURE  
WAXING  
PEDICURE  
FACIAL

FRANKLIN  
CLEANERS

32740

PAW BOUTIQUE  
NOW OPEN  
Pet Wellness, Toys, Accessories and Fashion

PAW BOUTIQUE  
NOW OPEN  
Pet Wellness, Toys, Accessories and Fashion

32734

32716

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Pet Wellness, Toys, Accessories and Fashion

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Pet Wellness, Toys, Accessories and Fashion

DO NOT CROSS

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PAW BOUTIQUE  
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Pet Wellness, Toys, Accessories and Fashion

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CUSTOMER  
PARKING  
ONLY

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CUSTOMER  
PARKING  
ONLY  
VIOLATORS WILL  
BE TOWED AT  
OWNER'S EXPENSE

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PARKING  
ONLY  
VIOLATORS WILL  
BE TOWED AT  
OWNER'S EXPENSE

32734

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Village Boutique  
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PLAZA  
CUSTOMER  
PARKING  
ONLY  
VIOLATORS WILL  
BE TOWED AT  
OWNER'S EXPENSE

DO NOT CROSS

DO NOT CROSS

DO NOT CROSS

DO NOT CROSS