

Agenda
Aurora Historic Review Board
Wednesday, June 26, 2024, 7 P.M.
City Council Chambers, Aurora City Hall
21420 Main Street NE, Aurora, OR 97002

To participate via Zoom:
<https://us02web.zoom.us/j/89248933201?pwd=5X8RjuV7mDOthmTWPGI7FZJm2sFMTq.1>
Meeting ID: 892 4893 3201
Passcode: 089729

1. CALL TO ORDER OF THE AURORA HISTORIC REVIEW BOARD MEETING

2. ROLL CALL

Chair Jan Peel
Co-Chair Julie Sixkiller
Member Richard Goddard

3. VISITORS

Anyone wishing to address the Aurora Historic Review Board concerning items not already on the meeting agenda may do so in this section. No decision or action will be made, but the Aurora Historic Review Board could look into the matter and provide some response in the future.

4. CONSENT AGENDA-NA

5. CORRESPONDENCE-NA

6. NEW BUSINESS

a) 21497 Hwy 99e Project Application: Corcoran Bathroom Remodel

7. OLD BUSINESS-NA

8. ADJOURN

**City of Aurora
HISTORIC REVIEW BOARD
Application for Certificate of Appropriateness**

PROJECT INFORMATION SHEET

IMPORTANT: In order for your application to proceed in a timely basis, this form and the required attachments **MUST** be completed in full. If your application is incomplete, no decision will be made and your request will be delayed. Please turn the complete application in at least **ONE WEEK** prior to the meeting (4th Tuesday of each month) so that board members can become familiar with your property and project. It is helpful, but not required, if you can attend the meeting.

You will need to refer to the 2016 *City of Aurora Design Guide for Historic District Properties* and the *Title 17 Historic Preservation, Design Standards*, both of which are included in the manual which may already be in your possession. They are also available at City Hall and on the City's website, www.ci.aurora.or.us.

Obtain your Historic Inventory Number from the city or by address in the City of Aurora *Inventory of Historic District Properties*. Using this number, read the information on your property in the *Aurora Colony Historic Resources* manual.

Remember to include ALL aspects of the project that will be affected (windows, color, porch details, setbacks, etc.) and address them according to the Title 17 Design Standards and the Design Guide.

Name TIM CORCORAN Date 06/11/24
 Business name (if applicable) _____
 Physical address 21497 Hwy 99E AURORA
 Mailing address 21358 Hwy 99E AURORA
 Phone 503-312-4819 email AURORACOLONY@gmail.com
 Type of project(s) List all BATHROOM EXPANSION @ MILEY HOUSE

Historic Inventory Number: _____

Zoning: Residential Commercial
Type of structure: House Commercial Church
Style: Colony Victorian Craftsman
 Ranch Contemporary Other (describe) _____

Project specifics:

Painting: Base color SAME AS EXISTING mfg/number _____
 Trim color SAME " " mfg/number _____
 Trim color " " " mfg/number _____

Design Standards used: TO MATCH ORIGINAL HOUSE

Please bring samples of colors you propose to use.

Staff Approved _____
 Date _____

*Paid \$30
 SAR
 check #104*

N/A **Fencing:** Picket Stock Privacy
 Other (describe) _____
 Height _____ Length _____
 Color _____
 Material _____
 Location (as shown on site plan) _____
 Design Standards used: _____

Roofing: Cedar Shingle Composition
 Other (describe) _____
 Color BLACK/SOLID mfg/number _____
 Design Standard used TO MATCH EXISTING

Staff Approved

Date _____

Composition roof colors must NOT appear 'dappled' but must be solid black. Manufacturer's photographs of a finished roof ARE required in addition to actual roofing samples. (You MUST bring a sample that is sufficiently large to show what the total roof will look like to insure that it appears as a solid color.)

N/A **Landscape:** Plantings _____
 Trees _____
 Tree Removal _____
 Design Standards used: _____

Staff Approved

Date _____

Other type of project(s): N/A

Please note Design Standards used (Item/page(s) for each separate project listed.)

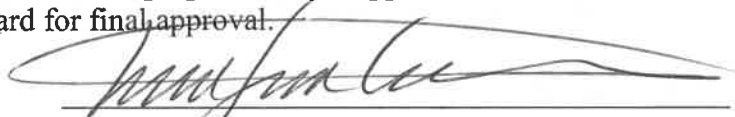
I TIM CORCORAN, have read the applicable information in the Design Standards and Design Guide.

- Attach the following in order for your application to be accepted:
1. A copy of your property's page from the Aurora Colony Historic Resources Manual. (You may print this out from the city's website or obtain it from the city)
 2. Site plan drawn to scale with project location shown.
 3. Elevations, including dimensions.
 4. A Photograph of the property is helpful but not required.

I have completed the application in full and included the above attachments. I understand that any changes or deviations from the presented materials proposed in this application must be submitted and re-examined by the Historic Review Board for final approval.

06/11/24

 Date



 Signature of Applicant

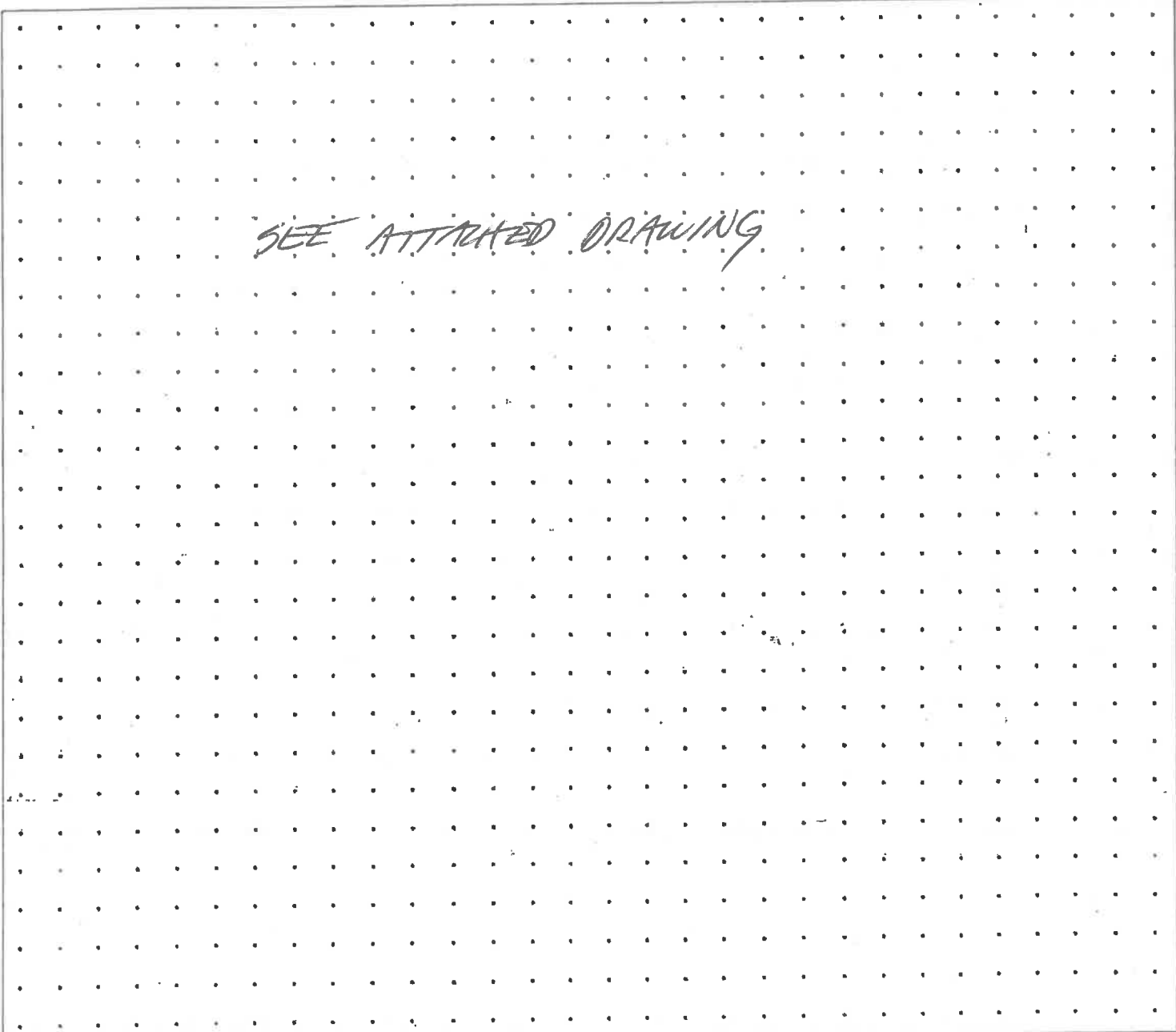
SITE PLAN FOR PROPOSED RESIDENTIAL DEVELOPMENT

TWO (2) COPIES REQUIRED

Property Owner(s) Name: _____ Phone: 503 312 4819
 Site Address: 21497 Hwy 99E City: AKOEA Zip: _____
 Subdivision: _____ Lot: _____ Block: _____ Manufactured Home Park: _____ Space: _____
 Assessor Map # (T-R-Sec-TL(s)): 041W13 BA1700 Total # Acres: .30 A
 Zoning Designation: COMMERCIAL Planning Map _____

SITE PLAN MUST SHOW ALL PROPERTY LINES AND DIMENSIONS

- Drawn to Scale; 1 square = _____
- Feet Not Drawn to Scale: Total Acres _____

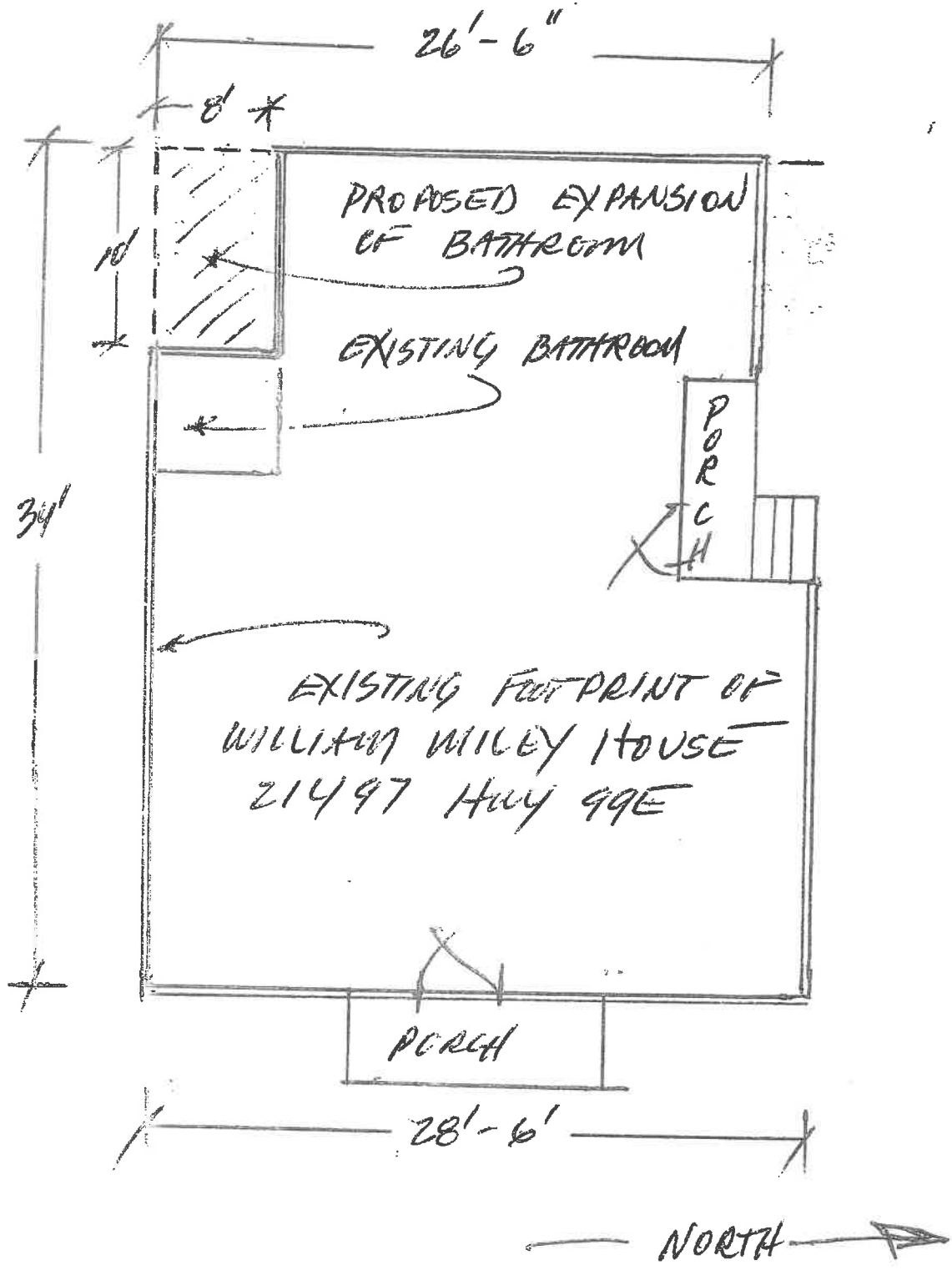


I certify that the above information is accurate to the best of my knowledge. I AM THE Owner or Authorized Agent
 My telephone number is: 503 312 4819 NAME (please print): TIM CORCORAN
 Applicant's Signature: _____ Date: 06/11/24
 Applicant's Mailing Address: 21358 Hwy 99E City: AKOEA Zip: 97002

FOR OFFICE USE ONLY

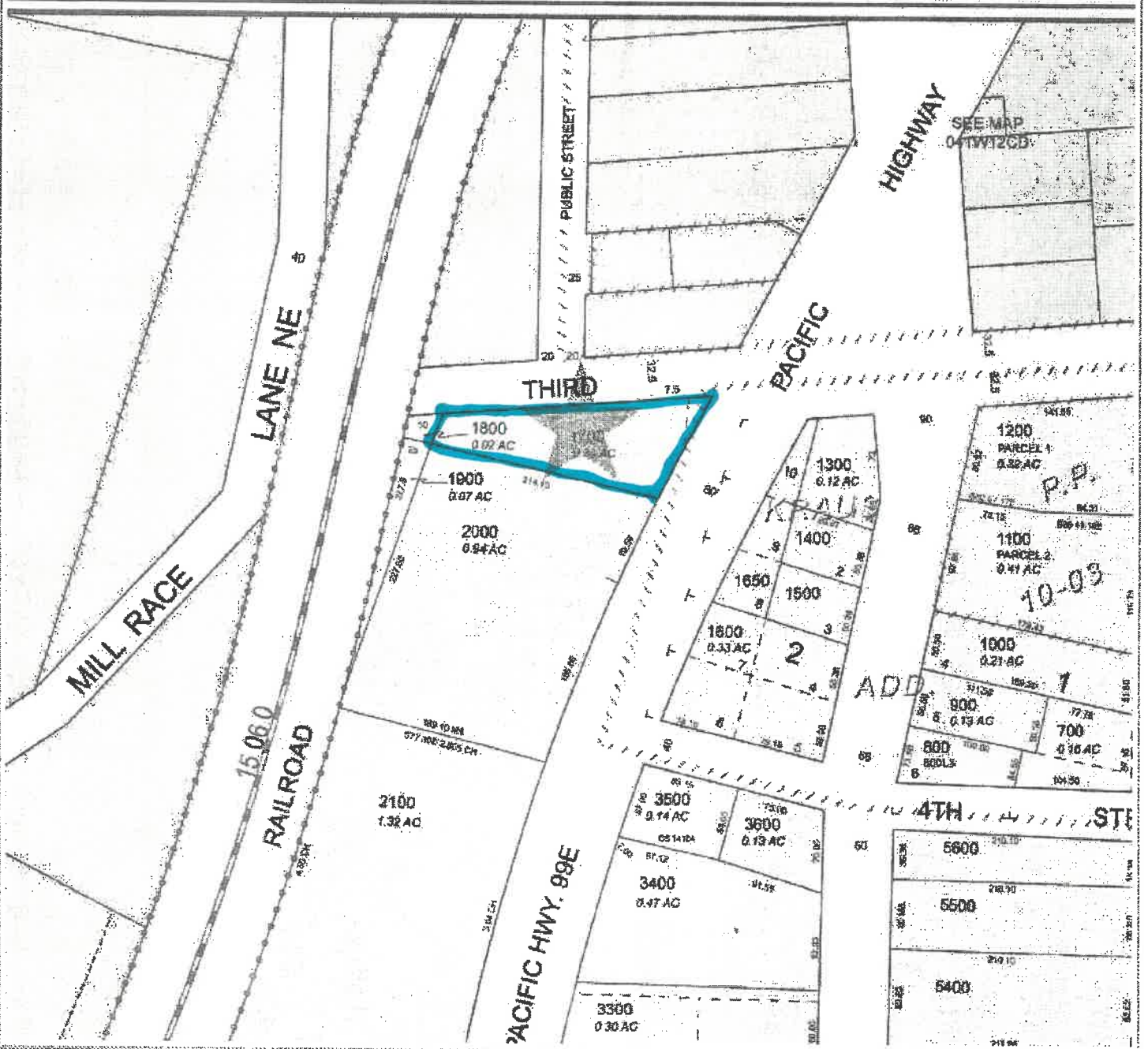
PLANNING: _____ Date: _____
 PUBLIC WORKS: _____ Date: _____
 BUILDING INSPECTION: Acceptable for Planning requirements only _____ Date: _____

TIM CORCORAN
(503) 312-4819



SIDEWALK
HIGHWAY 99E

TAX LOT #
041W13 BA1700



Parcel ID: 510770

Site Address: 21497 Highway 99e NE

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