



Historic District Review Board Meeting

May 19, 2026 at 5:00 PM

Cape Charles Civic Center - 500 Tazewell Avenue

Agenda

1. **Call to Order**
 - A. Roll Call
 - B. Establish Quorum
2. **Invocation and Pledge of Allegiance**
3. **Public Comments**
4. **Consent Agenda**
 - A. Approval of Agenda Format
 - B. Approval of Minutes
5. **Unfinished Business:**
 - A. 300 Strawberry Street

New Business: Applications for Certificate of Appropriateness:
6. **MODIFICATION TO APPROVED Certificate of Appropriateness:**
 - A. 520 Strawberry Street
7. **RENOVATIONS, ADDITIONS, & NEW CONSTRUCTION:**
 - A. 614 Peach Street
 - B. Tax Map 83A3-1-563A on Mason Avenue
8. **Other Business**
 - A. Report from Zoning Administrator
9. **Adjournment**



HISTORIC DISTRICT REVIEW BOARD

Regular Meeting
Cape Charles Civic Center
April 21, 2026
5:00 p.m.

At approximately 5:00 p.m., Chairwoman Kathy Glaser, having established a quorum, called to order the Regular Meeting of the Historic District Review Board (HDRB). In addition to Chairwoman Glaser, members present were Joan Cooper and Ken Monarch. Elizabeth Wright was not in attendance. Also in attendance were the Director of Planning and Zoning, Katie Nunez; Planning/Zoning Assistant Preservation and Zoning Administrator Tracy Outten; Town Clerk Libby Hume; and the applicants. There were no members of the public in attendance.

Chairwoman Glaser started the HDRB Regular meeting with a moment of silence and the recitation of the Pledge of Allegiance.

PUBLIC COMMENT:

There were no public comments to be heard, nor any written comments received prior to the meeting.

CONSENT AGENDA:

Motion made by Member Monarch, seconded by Member Cooper, to approve the Consent Agenda. The motion was approved by a unanimous vote.

NEW BUSINESS:

Certificate of Appropriateness Renovations, Minor:

- A. *300 Strawberry Street – install vinyl soffit on the roof eaves and aluminum metal over the wood trim; and to install vinyl siding on the accessory structure.*

Ms. Outten read the staff report and informed the board that the applicant, Adriana Henao, may be unavailable to answer any questions due to a work commitment.

Adriana Henao, the applicant, could not be reached by phone.

The board discussion was as follows: (i) Member Cooper referred to the Cape Charles Historic District Overlay Design Guidelines (CCHDODG) “Guidelines for Wood Siding & Trim”, which states “Avoid wrapping historic trim or ornamentation with another material.” (ii) Chairwoman Glaser wanted a better understanding of what was being proposed for the roof trim. (iii) Ms. Outten suggested that the board review and discuss each part of the application and either table or approve the proposal. (iv) After some discussion on wrapping the trim and installing vinyl soffit, the members decided to table those items until the applicant was available to answer questions. (v) Chairwoman Glaser thought the CCHDODG had a specific thickness required for vinyl siding. Ms. Outten explained that although there was a discussion about the thickness of vinyl siding during the updates to the guidelines, it was not included in the guidelines. She continued by reminding the board that the accessory structure was noncontributing and that they needed to follow Section 7.4: Noncontributing Considerations for Alternative Materials. Chairwoman Glaser said that most contractors have been using at least .042” thickness. Ms. Outten again reminded her that it was because the board suggested it to the contractors, not because the guidelines required it.

Motion made by Chairwoman Glaser, seconded by Member Monarch, to approve the application for a Certificate of Appropriateness at 300 Strawberry Street on an application filed by Adriana Henao to install vinyl siding on the existing wood accessory structure; per the Cape Charles Historic District Overlay Design Guidelines (HDODG) Section 6.1 – Noncontributing Accessory Structures Associated with Contributing Primary Buildings, Section 7.1 – Alternative Materials, and Section 7.4 Noncontributing Considerations; as stated in the application dated 2/19/2026; and per all zoning requirements. The motion was approved by a unanimous vote.

Motion made by Chairwoman Glaser, seconded by Member Monarch, to table the application for a Certificate of Appropriateness at 300 Strawberry Street on an application filed by Adriana Henao to install white vinyl soffit on the underside of the roof eaves and to wrap the existing wood trim with white aluminum metal, as the Historic District Overlay Design Guidelines said to avoid, until the applicant is available to answer questions. The motion was approved by a unanimous vote.

Certificate of Appropriateness for Renovations, Additions, and New Construction:

A. *619 Monroe Avenue – to replace the existing front steps.*

Ms. Outten presented the staff report.

Sean Ingram, the owner’s representative, was available to answer any questions. Mr. Ingram explained that the new step height would align with the new walkway, which would be slightly elevated to address puddling.

Motion made by Member Cooper, seconded by Member Monarch, to approve the application for a Certificate of Appropriateness at 619 Monroe Avenue on an application filed by QS, LLC on behalf of Jocelyn Blanchard to replace the existing front concrete steps with new Timbertech Azek tongue-and-groove steps on the single-family home; per the Cape Charles Historic District Overlay Design Guidelines (HDODG) Section 3.1 – Architectural Character, Section 3.2 – Building Types & Associated Architectural Styles: Craftsman, Section 5.10 – Exterior Trim & Details, Section 7.1 – Alternative Materials, and Section 7.4 – Noncontributing Consideration; as stated in the application dated 2/24/2026; and per all zoning requirements. The motion was approved by a unanimous vote.

B. *509 Harbor Avenue – to construct a new front porch.*

Ms. Outten summarized the staff report.

Sean Ingram, the owner’s representative, was available by phone to answer questions.

The board members did not have any questions.

Motion made by Member Monarch, seconded by Member Cooper, to approve the application for a Certificate of Appropriateness at 509 Harbor Avenue on an application filed by QS, LLC on behalf of LouEllen Blackwelder to construct a new 6’ x 22’ (132 square feet) front porch on the single-family home; per the Cape Charles Historic District Overlay Design Guidelines (HDODG) Section 3.1 – Architectural Character, Section 3.2 – Building Types & Associated Architectural Styles: Minimal Traditional, Section 5.10 – Exterior Trim & Details #2, Section 7.1 – Alternative Materials, and Section 7.4 – Noncontributing Consideration; as stated in the application dated 2/5/2026; and per all zoning requirements. The motion was approved by a unanimous vote.

C. *Tax Map #83A4-B-47 on Stone Road – to construct a new mixed-use building and an accessory structure.*

Ms. Outten read the staff report.

Kelly Decker, the applicant, was available to answer questions.

The board members' discussion was as follows: (i) Member Cooper asked if Ms. Decker would consider using the same siding material on the turret that was being used on the rest of the building. Ms. Decker answered that the stone was picked as this building was located on Stone Road.

Motion made by Member Cooper, seconded by Member Monarch, to approve the application for a Certificate of Appropriateness at Tax Map #83A4-B-47 on Stone Road on an application filed by Kelly Decker to construct a new 1,277 square feet two-story mixed-use building, a 294 square feet rear accessory structure, and to install a shell pavement parking area and a driveway; per the Cape Charles Historic

District Overlay Design Guidelines (HDODG) Section 5.13 – New Construction of Primary Buildings, Section 6.3 – New Accessory Structure/Accessory Dwelling Units (ADUs) Associated with New Primary Buildings, Section 9.1 – Hardscaping (Driveways, Walkways, & Other Paving), and Section 9.5 - Landscaping; as stated in the application dated 4/10/2026; and per all zoning requirements. The motion was approved by a unanimous vote.

OTHER BUSINESS:

A. Report from Zoning Administrator Katie Nunez

Ms. Nunez updated the board on (1) Administrative Approvals as follows: (i) Roof: None; (ii) Other: 542 Monroe Avenue, 610 Pine Street, 512 Randolph Avenue, 520 Randolph Avenue; (2) Compliance Checks by Zoning Compliance Officer & P/Z Asst. Preservation & Zoning Administrator on Issued Certificate of Appropriateness: None; and (3) Notices of Violations Issued on Behalf of the HDRB: None.

Ms. Nunez updated the board on the progress of the amendments to Town Code Chapter 32, Article VIII, and the addition of Appendix G to the Cape Charles Historic District Overlay Design Guidelines.

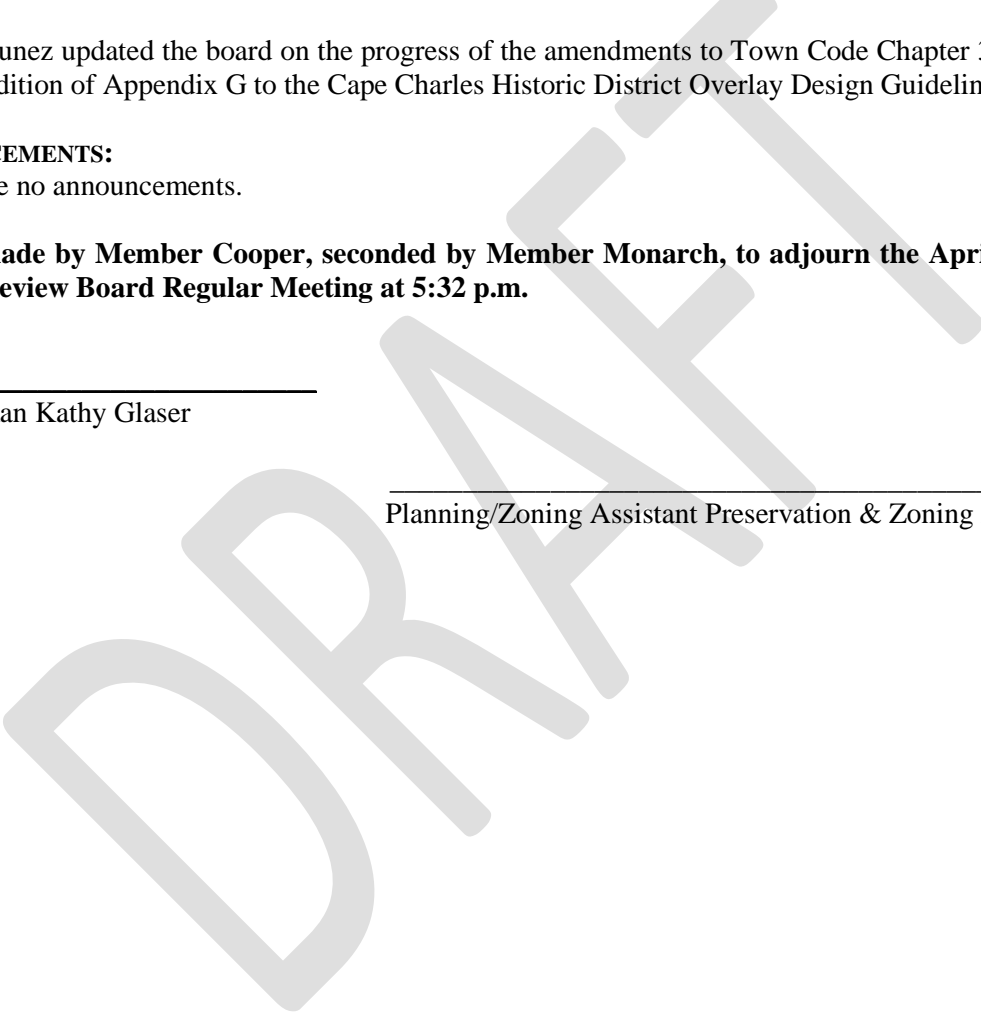
ANNOUNCEMENTS:

There were no announcements.

Motion made by Member Cooper, seconded by Member Monarch, to adjourn the April 21, 2026 Historic District Review Board Regular Meeting at 5:32 p.m.

Chairwoman Kathy Glaser

Planning/Zoning Assistant Preservation & Zoning Administrator





Historic District Review Board Staff Report

Agenda Title: 300 Strawberry Street

Agenda Date: ~~April 21, 2026~~ May 19, 2026

Prepared by: Tracy Outten, Planning/Zoning Assistant –
Preservation & Zoning Administrator

Reviewed By: Katie H. Nunez, Director of Planning & Zoning
Administrator

Date: April 11, 2026

Applicant: Ariana & Angela Henao	Type Of Application: Pre-Application/Certificate of Appropriateness
Site Address: 300 Strawberry Street	Work to be Performed: to install vinyl soffit on the eaves and aluminum metal over the wood trim
Tax Map: 83A3-1-294	Current Zoning: R-1
Lot Size: 5,600 sq. ft.	Historic Register: CONTRIBUTING <i>Description: Ca. 1950, Colonial Revival</i> <i>Accessory Structure: NA</i>

Date Application Received: February 19, 2026

Pre-Application Meeting: April 21, 2026

Date Application Deemed Complete: March 3, 2026

Legal Deadline: HDRB Decision (90 Days from Complete Application): June 1, 2026

Overview:

On April 21, 2026, the Historic District Review Board deferred the decision for the installation of white vinyl soffit on the underside of the roof eaves and white aluminum metal over the existing wood roof trim on the single-family home until the applicant was available to answer questions.

Aerial Map:



Materials:

Roof: Eaves: Vinyl Soffit; Trim: Aluminum Metal

Staff Analysis:

Zoning Compliance:

The property is a legal, conforming use. The proposed project seeks to install vinyl soffit on the underside of the roof eaves and aluminum over the existing wood roof trim on the single-family dwelling. Zoning Compliance has been achieved based upon this application to the HDRB.

Any property within the Historic District Overlay is required to meet the Historic District Guidelines, which are superimposed on the underlying zoning district regulations.

Historic District Guidelines:

- Section 3.1: Architectural Character*
- Section 3.2: Building Types, Forms, & Associated Architectural Styles (Page 3-16 – Colonial Revival)*
- Section 5.2.1: Roof Features*
- Section 5.4.1: Wood Siding & Trim*
- Section 7.1: Alternative Materials*
- Section 7.4: Noncontributing Considerations*

Staff Recommendation:

Staff is requesting that the HDRB review the application materials submitted by the applicant and determine whether the proposed installations on the single-family dwelling and the siding replacement on the accessory structure, and the materials, are in keeping with the Guidelines of the Historic District and reflect the character and historic appearance of the neighborhood.

Staff is prepared to assist in developing a motion, if needed.

The Historic District Review Board makes the final determination on whether or not a Certificate of Appropriateness will be issued for this project and may impose conditions on an approval.

If approved, a Certificate of Appropriateness shall expire of its own limitation six (6) months from the date of issuance if the work authorized thereby is not commenced by the end of such six (6) month period; and further, any such certificate shall also expire and become null and void if such authorized work is suspended or abandoned for a period of six (6) months after being commenced.

Attachments:

Attachment 1: Application and Supporting Documents



Certificate of Appropriateness Application Renovation

Planning & Zoning Department
412 Tazewell Avenue
Cape Charles, VA 23310
757-331-3259 x31
planningtech@capecharles.org

Section 5, Item A.

Revised 02/2026	
Taxes	Paid
Violations	NA
Fee	
Decision	HDRB

Budget Code: HISTF 100-3100-1100

Budget Code VIOLATIONS: PERMZ 100-3100-1370

PART 1: APPLICATION NOTES

A Certificate of Appropriateness is required for all applications for zoning clearances and permits involving any exterior alteration, modification, restoration, reconstruction, demolition, new construction or moving of a property within the Cape Charles Historic District Overlay.

Minor Exterior Work* is exterior maintenance and repair, replacement of missing or broken windowpanes, roofing shingles, slates, tiles, porch floors, posts, rails, or shutters where no substantial change to design or material is proposed and other minor changes that do not materially change the historic characteristics of the building may be reviewed by the Zoning Administrator. Upon approval the applicant is responsible for confirming and obtaining all necessary building permits.

Major Exterior Work: is any alteration of the architectural style of a structure or its significant architectural elements, modifications, additions, and any major or minor work not eligible for administrative review must be reviewed and approved* by the Historic District Review Board. Upon approval the applicant is responsible for confirming and obtaining all necessary building permits.

Note: A pre-application meeting is available upon request prior to submitting this application.

The following documents must be submitted to the Town before this application can be reviewed. In addition to these documents, the COA application and requested supporting information relevant to the applicable sections must be deemed complete by department staff prior to being evaluated.

- A) Zoning Clearance Application
 B) Photos of existing condition
 C) Owner Permission Affidavit
 D) Payment of COA Fee (Residential – Minor \$75, Major \$150 / \$500 OR Commercial/Commercial Residential - \$1,000)
 E) Site Plan/Survey
 F) Material Specifications
 G) Tree Permit Application

Owner signature: _____

Date: _____

PART 2: PROPERTY INFORMATION

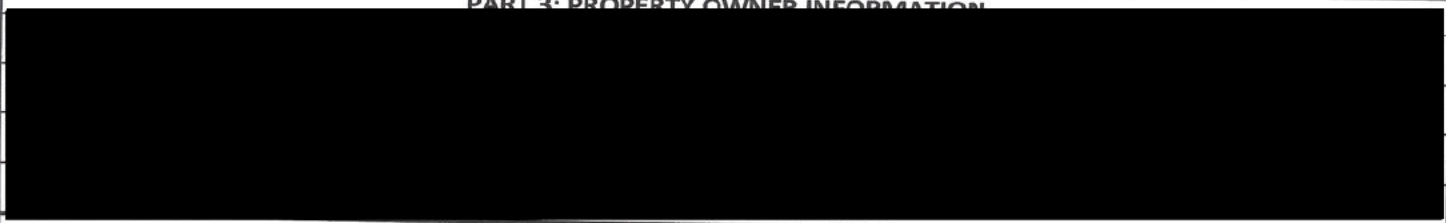
Property Address: **300 Strawberry Street Cape Charles, VA 23310**

Tax Map #: **83A3-1294**

Is there an active Certificate of Appropriateness on this property? No Yes _____ Date

Zoning District: **R-1**

PART 3: PROPERTY OWNER INFORMATION



PART 4: APPLICANT INFORMATION

Check here if the applicant is owner. (If applicant is not the property owner, an Owner's Permission Affidavit must be attached.)

Name and/or Company: _____

Mailing Address: _____

Phone Number: _____

Email: _____

PART 5: PROJECT INFORMATION – Describe in detail proposed work.

(If any tree removal is being proposed a Tree Permit Application must be completed):
 Install white siding on the walls of the shed located in the back yard.
 Install vinyl soffit under the house eaves and white aluminum metal covering over the white wood trim.

PART 6. ALTERATIONS, REPAIRS OR ADDITIONS

Select the type of work to be performed (check all that apply):

- Addition Doors Windows Masonry Porch Roofs Siding Steps/Stoop & Railings
 Trim Work Fence or Wall Partial demolition Hardscaping Appurtenances Other:

A. ADDITION Not applicable **SEE SECTION 5.6 or 5.12 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Location (Attach a diagram; Survey/Site Plan is required):

Stories:	Building height:	Footprint:	Gross square footage:
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Complete all sections below that apply to your addition and supply elevation drawings.

B. ROOF Not applicable **SEE SECTION 4.2, 5.2, or 5.8 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: New Repair % of roof structure ____ Reroofing: In kind ____ Different in style or material ____
 Add/Repair Gutters and downspouts Solar Panels Other Solar Installation

Location (Pictures of existing condition):

Existing Roof	Proposed Roof
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work:
Existing Material:	Proposed Material:
Pitch:	Pitch:
Gutters & Downspouts: (Pictures of Location & Material Specs)	Solar: (Pictures of Location & Material Specs)
Proposed Work:	Proposed Work:
Proposed Material:	Proposed Material:
Other / Additional Notes:	

C. DOORS Not applicable **SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Number of doors to be: Added: ____ Removed: ____
 Repaired: ____ Replaced: In kind ____ Different in style or material ____

Attach a diagram of the house exterior with all doors numbered. Add documentation for each additional door.

Existing Door	Proposed Door
Door 1: Complete a separate Section C for each door being modified. Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced
Existing Material:	Proposed Material:
Dimensions: Width ____ Height ____	Dimensions: Width ____ Height ____
Configuration with picture (i.e., glass panes, divisions, decorative details & panels):	Configuration with picture (i.e., glass panes, divisions, decorative details & panels):

Indicate the reason for change:

D. WINDOWS Not applicable SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of windows to be: Added: _____ Removed: _____
 Repaired: _____ Replaced: In kind _____ Different in style or material _____

Minimum Guidelines: Window Sill – thickness of 1-1/2” and Window Casing or Trim – thickness of 3-1/2”

Attach a diagram of the house exterior with all windows numbered. Add documentation for each additional window.

Existing Windows	Proposed Windows
Window 1: Complete a separate Section D for each window being modified if it is a different size, configuration, etc. Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture
Width: _____ Height: _____ Depth: _____	Width: _____ Height: _____ Depth: _____
Existing Material: _____	Proposed Material: _____
Sill: Length: _____ Thickness: _____ Depth: _____	Sill: Length: _____ Thickness: _____ Depth: _____
Existing Material: _____	Proposed Material: _____
Casing / Trim: Width: _____ Height: _____ Depth: _____	Casing / Trim: Width: _____ Height: _____ Depth: _____
Existing Material: _____	Proposed Material: _____
Shutters: Original: <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach Location Picture)	Shutters: <input type="checkbox"/> Repair <input type="checkbox"/> Replace <input type="checkbox"/> New (Attach Location Picture)
Existing Material: _____	Proposed Material: _____
Indicate the reason for change:	

E. PORCHES Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

New materials should match the historic material, composition, shape, size, and other visual qualities.

Work to be done: Repair flooring Repair ceiling Repair columns Repair/Add Skirting Repair/Add Screening
 Flooring = Alter Replace Repair Columns = Alter Replace Repair
 Balustrade = Alter Replace Repair Ceiling = Replace Repair Skirting = New Replace Repair

Location (Attach pictures for all work including existing and proposed; Survey may be requested):

FLOORBOARDS: Number of boards to be: _____ Repaired _____ Replaced _____ Altered

Replacement of flooring should match the historic floorboard orientation. Replacement of an entire porch floor, ensure the new floor slopes away from the building.

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material: _____	Proposed Material: _____
Dimensions: Length: _____ Width: _____ Depth: _____	Dimensions: Length: _____ Width: _____ Depth: _____
CEILING	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material: _____	Proposed Material: _____
COLUMNS	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material & Design: _____	Proposed Material & Design: _____
Existing Dimensions: Height: _____ Width: _____ Diameter: _____	Proposed Dimensions: Height: _____ Width: _____ Diameter: _____

CONTINUE COMPLETING THIS SECTION ON PAGE 4

BALUSTRADE

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material:
Existing Dimensions: Height: Width: Diameter:	Proposed Dimensions: Height: Width: Diameter:
Existing Style / Design:	Proposed Style / Design:

SCREENING

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work: <input type="checkbox"/> New <input type="checkbox"/> Replace <input type="checkbox"/> Repair
Existing Material:	Proposed Material:

SKIRTING

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work: <input type="checkbox"/> New <input type="checkbox"/> Replace <input type="checkbox"/> Repair
Existing Material:	Proposed Material:

If replacing any item above, indicate the reason for replacement:

If altering any item above, describe any proposed change (material, size, etc.):

F. STEPS/STOOPS/RAILINGS Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach pictures; Survey may be requested):

Number of **Steps** to be: ___ Repaired ___ Replaced ___ Altered

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material:
Dimensions: Rise: Run: Tread Width:	Dimensions: Rise: Run: Tread Width:

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

Stoop to be: ___ Repaired ___ Replaced ___ Altered

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material & Size:	Proposed Material & Size:

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

Number of **Railings** to be: ___ Repaired ___ Replaced ___ Altered

Location (Attach pictures; Survey may be requested):

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material:
Existing Dimensions: Height: Width: Diameter:	Proposed Dimensions: Height: Width: Diameter:
Existing Style / Design:	Proposed Style / Design:

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

G. SIDING Not applicable **SEE SECTION 4.4, 5.4, or 5.9 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: Minor Repair Full Re-Siding (same material) Full Re-Siding (Change of material)

Location (Attach diagram & pictures): **Existing wood painted shed located in the back yard**

Existing Siding	Proposed Siding
Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
Existing Material:	Proposed Material:
Dimensions: Thickness: Width:	Dimensions: Thickness: Width:

Indicate the reason for change, e.g., underlying material condition, rot:
Current shed is painted. Want to preserve shed by adding white siding to the current painted wood.

H. TRIM WORK Not applicable **SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: Minor Repair Alteration

Location (Attach diagram & pictures): **White wood trim around the house**

Existing Trim	Proposed Trim
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	
Existing Material:	Proposed Material:
Dimensions: Width: Height: Depth:	Dimensions: Width: Height: Depth:
Style / Design:	Style / Design:

Reason for repair or alteration (change of material or design):
Current wood trim is painted white. Want to cover with white aluminum metal to protect the wood.

I. MASONRY Not applicable **SEE SECTION 4.3 or 5.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: New foundation Substantial Reconstruction Minor Repair Repointing

Location (Attach diagram & pictures):

Existing Masonry	Proposed Masonry
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	
Existing Material:	Proposed Materials:
Existing mortar: Joints:	Mortar to be used: Mortar joints:

Other / Additional Notes: **(Unpainted masonry cannot be painted.)**

Existing Chimney	Proposed Chimney
Show location and document conditions with photographs	<input type="checkbox"/> Repair <input type="checkbox"/> Remove <input type="checkbox"/> Add a chimney cap

Indicate the reason for change and materials:

J. HARDCAPING Not applicable **SEE SECTION 9.1 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Location (Attach Site Plan/Survey & pictures):

<input type="checkbox"/> Driveway:	Length:	Width:	Materials:
<input type="checkbox"/> Walkway:	Length:	Width:	Materials:
<input type="checkbox"/> Other Paving:	Length:	Width:	Materials:

K. FENCE OR WALL Not applicable SEE SECTION 9.2 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: New Repair % of structure ___ Replace In kind ___ Different in style or material ___

Location (include survey showing location, setbacks, and height)

Existing Material:	Proposed Material
Height:	Height:
Describe the style:	Describe the style:

L. DECKS & PATIOS Not applicable SEE SECTION 9.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach Site Plan/Survey & pictures):

<input type="checkbox"/> Deck: Length: _____ Width: _____ Materials: _____
<input type="checkbox"/> Patio: Length: _____ Width: _____ Materials: _____

M. APPURTENCES Not applicable SEE SECTION 9.4 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach Site Plan/Survey & pictures):

New Repair Replacing Other:

Outdoor Shower: Enclosed Length: _____ Width: _____

Material: _____ Foot Pad Material: _____

Other, describe: _____

Dimensions: _____ Material _____

Other: _____

Dimensions: _____ Material _____

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct, and that the construction or improvements will conform to the regulations in the Virginia Statewide Building Code, all pertinent Town Codes, including fire, sewer and water codes, and private building restrictions, if any, which may be imposed on the property by deed. Furthermore, I certify that the changes to the improvement before or during construction will be provided to the Zoning Administrator and Building Official before such changes are constructed.

Applicant's signature: Aldiana Henao

Date: 19 FEB 2026

Zoning Administrator's signature: _____

Date: _____

Town Code Chapter 32, Article VIII, Section: _____







300 Strawberry Street





Historic District Review Board Staff Report

Agenda Title: 520 Strawberry Street

Agenda Date: May 19, 2026

Prepared by: Tracy Outten, Planning/Zoning Assistant – Preservation & Zoning Administrator

Reviewed By: Rick Keuroglan, Town Manager

Date: May 11, 2026

Applicant: Andrew & Jacqueline Sears represented by Coastal Craftsman Builders, LLC

Type Of Application: Pre-Application/Certificate of Appropriateness

Site Address: 520 Strawberry Street

Work to be Performed: to modify the siding and chimney

Tax Map: 83A1-8-F

Current Zoning: R-1

Lot Size: 2,920 sq. ft.

Historic Register: NA

Description:

Accessory Structure:

Date Application Received: April 20, 2026

Pre-Application Meeting: May 19, 2026

Date Application Deemed Complete: May 6, 2026

Legal Deadline: HDRB Decision (90 Days from Complete Application): July 6, 2026

Overview:

The applicant is seeking to modify the size of the approved Certainteed Vinyl Lap siding, with a 6” exposure and .044 thickness, to Certainteed Restoration Classic Double 4-1/2” Vinyl siding, and to change the chimney construction from an exposed metal pipe to a stucco frame.

Aerial Map:



Materials:

Chimney: Framed and Covered with Stucco

Siding: Certaineed Restoration Classic Vinyl Siding Double 4.5"

Staff Analysis:

Zoning Compliance:

The property is a legal, non-conforming use. The proposed project seeks to modify the approved siding and chimney construction for the single-family dwelling. The proposed materials are in conformance with the Zoning Ordinance for new construction, and Zoning Compliance is achieved based upon this application to the HDRB.

Any property within the Historic District Overlay is required to meet the Historic District Guidelines, which are superimposed on the underlying zoning district regulations.

Historic District Guidelines:

Section 5.13: New Construction of Primary Buildings

Section 7.1: Alternative Materials

Section 7.4: Non-Contributing Considerations

Staff Recommendation:

Staff is requesting that the HDRB review the application materials submitted by the applicant and determine whether the proposed modifications for the new single-family dwelling are in keeping with the Guidelines of the Historic District and reflect the character and historic appearance of the neighborhood.

Staff is prepared to assist in the development of a motion, if needed.

The Historic District Review Board makes the final determination on whether or not a Certificate of Appropriateness will be issued for this project and may impose conditions on an approval.

If approved, a Certificate of Appropriateness shall expire of its own limitation six (6) months from the date of issuance if the work authorized thereby is not commenced by the end of such six (6) month period; and further, any such certificate shall also expire and become null and void if such authorized work is suspended or abandoned for a period of six (6) months after being commenced.

Attachments:

Attachment 1: Application and Supporting Documents



Application for Modification to Approved Certificate of Appropriateness

Planning & Zoning Department
412 Tazewell Avenue
Cape Charles, VA 23310
757-331-3259 x31

planningtech@capecharles.org

02/2026	
Taxes	Paid
Violations	NA
pd chk Fee #6677	\$200
Decision	HDRB

Budget Code: HISTF 100-3100-1100

Budget Code VIOLATIONS: PERMZ 100-3100-1370

PART 1: APPLICATION NOTES

A Certificate of Appropriateness (CoA) is required for all applications for zoning clearances and permits involving any exterior alteration, modification, restoration, reconstruction, demolition, new construction or moving of a property within the Cape Charles Historic District Overlay.

Modifications to an existing CoA: During construction, there are at times cause for modification (s)* to designs previously approved by the Zoning Administrator and/or HDRB. In this instance, the applicant should schedule a meeting with the Planning/Zoning Department to determine whether the changes are substantial and require action by the body that initially issued the CoA.

*New proposals that were not on the original application are not considered modifications.

The following documents must be submitted to the Town before this application can be reviewed. In addition to these documents, the Modification COA application and requested supporting information relevant to the applicable sections must be deemed complete by department staff prior to being evaluated.

- A) Zoning Clearance Application
- B) Previously Approved CoA
- C) Site Plan/Survey
- D) Photos of existing condition
- E) Material Specifications
- F) Owner Permission Affidavit
- G) Payment of CoA Fee (\$200)
- Tree Permit Application

Owner signature:

Robert Summers

Date:

4/20/26

PART 2: PROPERTY INFORMATION

Property Address:

520 Strawberry St.

Tax Map #:

03A 1-8-F

Active Certificate of Appropriateness Date: 10/15/2025

Zoning District: R-1

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company:

Andy & Jacqueline Sears

PART 4: APPLICANT INFORMATION

Check here if the applicant is owner. (If applicant is not the property owner, an Owner's Permission Affidavit must be attached.)

Name and/or Company:

Coastal Craftsman Builders, LLC

PART 5: PROJECT INFORMATION

Proposed Modification Description & Reason (If any tree removal is being proposed a Tree Permit Application must be completed):

• No exposed chimney pipe; chase framed & covered in Stucco to match same mortar on front brick piers
• change siding size

PART 6. MODIFICATION SPECIFICATIONS

Select reason for modification (check all that apply):
 Materials: Approved product is unavailable Reconsideration of materials Other: _____

Approved design/project plan (Complete all sections below that apply to the modification and supply all required documents):

Expansion of project scope Reduction of project scope
 Unexpected repairs Other: _____

Select the type of work to be performed (check all that apply):

Addition Doors Windows Masonry Porch Roofs Siding Steps/Stoop & Railings
 Trim Work Fence or Wall Partial demolition Hardscaping Other: *chimney*

A. ADDITION Not applicable SEE SECTION 5.6 or 5.12 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Approved Location (Attach a diagram and Survey/Site Plan is required):

Stories:	Building height:	Footprint:	Gross square footage:
----------	------------------	------------	-----------------------

Proposed Location (Attach a diagram and Survey/Site Plan is required):

Stories:	Building height:	Footprint:	Gross square footage:
----------	------------------	------------	-----------------------

Indicate Reason for modification:

Complete all sections below that apply to your addition and supply elevation drawings.

B. ROOF Not applicable SEE SECTION 4.2, 5.2, or 5.8 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: New Repair % of roof structure ____ Reroofing: In kind ____ Different in style or material ____
 Add/Repair Gutters and downspouts Solar Panels Other Solar Installation

Location (Pictures of existing condition):

Existing Roof	Approved Roof	Proposed Roof
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work:	Work:
Existing Material:	Materials:	Materials:

Indicate reason for change of material:

Indicate reason for modification:

C. DOORS Not applicable SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of doors approved to be: Added: _____ Removed: _____ Replaced: _____ Repaired: _____

Please complete a Section C for each individual door if a different size or configuration.

Attach a diagram of the house exterior with all doors numbered. Add documentation for each additional door.

Existing Door	Approved Door
Door 1: Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	Work approved to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Replaced <input type="checkbox"/> Repaired
Existing Material:	Approved Material:
Dimensions: Width _____ Height _____	Dimensions: Width _____ Height _____
Configuration with picture (i.e., glass panes, divisions, decorative details & panels):	Configuration with picture (i.e., glass panes, divisions, decorative details & panels):

Proposed Door	
Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Replaced <input type="checkbox"/> Repaired	Indicate the reason for modification:
Proposed Material:	
Dimensions: Width _____ Height _____	
Configuration with picture (i.e., glass panes, divisions, decorative details & panels):	

D. WINDOWS Not applicable SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of windows to be: Added: _____ Removed: _____

Replaced: In kind _____ Different in style or material _____ Repaired: _____

Minimum Standards: Window Sill – thickness of 1-1/2" Window Casing or Trim – thickness of 3-1/2"

Shutters: Added: _____ Removed: _____ Replaced: In kind _____ Different in style or material _____ Repaired: _____

Please complete a Section D for each window if various sizes or configurations.

Attach a diagram of the house exterior with all windows numbered. Add documentation for each additional window.

Existing Windows	Approved Windows
Window 1: Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	Work approved to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Replaced <input type="checkbox"/> Repaired
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture
Width: _____ Height: _____ Depth: _____	Width: _____ Height: _____ Depth: _____
Material:	Material:
Sill: Length: _____ Thickness: _____ Depth: _____	Sill: Length: _____ Thickness: _____ Depth: _____
Material:	Material:
Casing / Trim: Width: _____ Height: _____ Depth: _____	Casing / Trim: Width: _____ Height: _____ Depth: _____
Material:	Material:
Shutters: Width: _____ Height: _____	Shutters: Width: _____ Height: _____
Material:	Material:

Proposed Windows	
Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Replaced <input type="checkbox"/> Repaired	Indicate the reason for modification:
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture	
Width: Height: Depth:	Material:
Sill: Length: Thickness: Depth:	Material:
Casing / Trim: Width: Height: Depth:	Material:
Shutters: Width: Height:	Material:
E. PORCHES <input checked="" type="checkbox"/> Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES	
<u>New materials should match the historic material, composition, shape, size, and other visual qualities.</u>	
Work Approved to be done: <input type="checkbox"/> Flooring = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Columns = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair Replacement of flooring should match the historic floorboard orientation. Replacement of an entire porch floor, ensure the new floor slopes away from the building.	
<input type="checkbox"/> Balustrade = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Ceiling <input type="checkbox"/> Skirting	
Work to be modified: <input type="checkbox"/> Flooring = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Columns = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Balustrade = <input type="checkbox"/> Alter <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Ceiling <input type="checkbox"/> Skirting	
Location (Attach pictures for all work; Survey may be requested):	
Skirting: ___ Repaired ___ Replaced ___ Removed	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Removed
Existing Material:	Material Approved:
Work Proposed: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for modification:
Proposed Material:	
Floorboards: Number of boards to be: ___ Repaired ___ Replaced ___ Altered ___ All boards	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Material Approved:
Dimensions: Length: Width:	Dimensions: Length: Width:
Work Proposed: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for modification:
Proposed Material:	
Dimensions: Length: Width:	
Ceiling: Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Material Approved:
Proposed Work: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for modification:
Proposed Material:	
Columns: ___ Repaired ___ Replaced ___ Altered	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Material Approved:
Existing Dimensions: Height: Width: Diameter:	Approved Dimensions: Height: Width: Diameter:
Proposed Work: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate for modification:
Proposed Material:	
Proposed Dimensions: Height: Width: Diameter:	

Balustrade: _____ Repaired _____ Replaced _____ Altered

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Approved Material:
Existing Dimensions: Height: _____ Width: _____ Diameter: _____	Approved Dimensions: Height: _____ Width: _____ Diameter: _____
Proposed Work: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for modification:
Proposed Material:	
Proposed Dimensions: Height: _____ Width: _____ Diameter: _____	
Indicate the reason for change:	

F. STEPS/STOOPS/RAILINGS Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of Steps/Stoops to be: _____ Repaired _____ Replaced _____ Altered

Location (Attach pictures; Survey may be requested):

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Material Approved:
Proposed Work: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for change:
Proposed Material:	
If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):	

Number of Railings to be: _____ Repaired _____ Replaced _____ Altered

Location (Attach pictures; Survey may be requested):

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered
Existing Material:	Material Approved:
Existing Dimensions: Height: _____ Width: _____ Diameter: _____	Approved Dimensions: Height: _____ Width: _____ Diameter: _____
Proposed Work: <input type="checkbox"/> Repaired <input type="checkbox"/> Replaced <input type="checkbox"/> Altered	Indicate reason for modification:
Proposed Material:	
Proposed Dimensions: Height: _____ Width: _____ Diameter: _____	
If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):	

G. SIDING Not applicable SEE SECTION 4.4, 5.4, or 5.9 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: Minor Repair Full Re-Siding (same material) Full Re-Siding (Change of material)

Location (Attach diagram & pictures):

Existing Siding	Approved Siding
Original to the home: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	Work Approved:
Existing material:	Approved Material:
Dimensions: Thickness: _____ Width: _____	Dimensions: Thickness: _____ Width: _____
Proposed Siding: Work Proposed: <input type="checkbox"/> Minor Repair <input type="checkbox"/> Full Re-Siding (same material) <input type="checkbox"/> Full Re-Siding (Change of material)	
Proposed Material: <i>Certaainteed Vinyl</i>	Dimensions: <i>Double 4.5"</i>
Indicate the reason for change, e.g., underlying material condition, rot: <i>Reconsider of material</i>	

H. TRIM WORK Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: Minor Repair Alteration

Location (Attach diagram & pictures):

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved:
Existing Material:	Approved Material:
Dimensions: Width: Height: Depth:	Dimensions: Width: Height: Depth:
Design:	
Proposed Work:	Indicate reason for modification:
Proposed Material:	
Dimensions: Width: Height: Depth:	

Reason for repair or alteration (change of material or design):

I. MASONRY Not applicable SEE SECTION 4.3 or 5.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: New foundation Substantial Reconstruction Minor Repair Repointing

Location (Attach diagram & pictures):

Existing Masonry	Approved Masonry
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Work Approved:
Existing Material:	Approved Material:
Existing mortar: Joints:	Approved Mortar: Mortar joints:
Proposed Work:	Indicate reason for change:
Proposed Material:	
Mortar: Mortar joints:	

Other / Additional Notes: (Unpainted masonry cannot be painted.)

Existing Chimney	Proposed Chimney
Show location and document conditions with photographs	<input type="checkbox"/> Repair <input type="checkbox"/> Remove <input type="checkbox"/> Add a chimney cap

Indicate the reason for change and materials:

No exposed chimney pipe; chase chimney framed & covered in stucco to match front mortar

J. HARDSCAPING Not applicable SEE SECTION 9.1 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: Driveway Walkway Golf Cart Parking Other:

Existing Condition: Original Not Original New Not Sure

Location (include survey showing location, setbacks, dimensions, and material):

Material:	Dimensions: Length: Width:
Material:	Dimensions: Length: Width:

Proposed Modification:

Indicate reason for change:

No exposed chimney pipe

K. FENCE OR WALL Not applicable **SEE SECTION 9.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: New Repair % of structure ____ Replace In kind ____ Different in style or material ____

Location (include survey showing location, setbacks, and height)

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Approved Work:
Material:	Approved Material:
Height:	Approved Height:

Proposed Modification: New Repair % of structure ____ Replace In kind ____

Proposed Material: _____ Proposed Height: _____

Describe the style: _____

Indicate the reason for modification: _____

L. DECKS & PATIOS Not applicable **SEE SECTION 9.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

<input type="checkbox"/> Deck:	Length:	Width:	Materials:
<input type="checkbox"/> Patio:	Length:	Width:	Materials:
<input type="checkbox"/> Ramp:	Length:	Width:	Materials:

Proposed Modification and Reason for Modification: _____

M. APPURTENANCES Not applicable **SEE SECTION 9.4 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Solar Panels, Outdoor Showers, etc.

Type of work: New Repair % of structure ____ Replace In kind ____ Different in style or material ____

Location (include survey showing location, setbacks, and height)

Existing:	Approved:
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Material:
Material:	Dimensions:
Dimensions:	Style:

Proposed Modification (Material, Dimensions, Style): _____

Indicate reason for modification: _____

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct, and that the construction or improvements will conform to the regulations in the Virginia Statewide Building Code, all pertinent Town Codes, including fire, sewer and water codes, and private building restrictions, if any, which may be imposed on the property by deed. Furthermore, I certify that the changes to the improvement before or during construction will be provided to the Zoning Administrator and Building Official before such changes are constructed.

Applicant's signature: Robin James Date: 4/20/26

Zoning Administrator's signature: _____ Date: _____

Town Code Chapter 32, Article VIII, Section: _____



Owner Affidavit for Permission to Represent

Planning & Zoning Department
2 Plum Street; Cape Charles, VA 23310
757-331-3259 x31

planningtech@capecharles.org

Revised 0	Section 6, Item A.
Taxes	
Violations	
Fees	
Decision	

PART 1: APPLICATION NOTES
Use this form to give permission for a contractor, architect, or other individual to represent the owner of a property in matters within the Town of Cape Charles.

PART 2: PROPERTY INFORMATION

Property Address: 520 Strawberry St. Cape Charles, VA 23310 Tax Map #: 83A3-13-A

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company: Andy & Jacqueline Sears

PART 4: REPRESENTATIVE INFORMATION

Name and/or Company: Coastal Craftsman Builders

to file documents on my behalf To represent me in meetings with Town officials

Name and/or Company: _____
Mailing Address: _____
Phone Number: _____ Email: _____

to file documents on my behalf To represent me in meetings with Town officials

Signature of owner: [Signature] Date: 7/31/25

State of VIRGINIA County of SPOTSYLVANIA The foregoing instrument was acknowledged before me this 31 day of JULY, 2025, by ANDY SEARS (name of person acknowledged)

Signature of Notarial Officer: [Signature]

Notary Registration number: 7527396

My commission expires: 11-30-2028



Seal



MUNICIPAL CORPORATION OF CAPE CHARLES

CERTIFICATE OF APPROPRIATENESS

Date Issued: 10/15/2025

Issued to: Andrew & Jacqueline Sears represented by Coastal Craftsman Builders, LLC For Property: Tax Map # 83A1-8-F
[Redacted] Strawberry Street
Cape Charles, VA 23310

This Certificate of Appropriateness has been issues for the above-noted property for the purpose of:

Constructing a new 1,020.25 square feet two-story single-family home, enclosed 27 square feet rear outdoor shower; and installing a sidewalk as stated in the application dated 8/28/2025. The Historic District Review Board approved the application as presented with any designated condition/s and the standard condition stated below per Zoning Ordinance 8.16 and the Historic District Overlay Design Guidelines (HDODG) Sections 5.13, 9.1, 9.3, 9.4, and 9.5.

Materials: See page 2.

Designated Condition/s: The exposed steel chimney flue must be painted / treated with a matte finish to be more compatible with the neighborhood.

Standard Condition: Any further modifications to any approvals or circumstances that are found during the project that warrant changes must be reported to the Planning and Zoning Department.

Zoning Administrator Condition/s: Landscaping plan will be required.

This Certificate of Appropriateness shall be valid for only the specific use described above. It is valid for a period of six months after the date of approval; if not acted upon within six months, or if work is suspended or abandoned for a period of six months after work has commenced, this Certificate of Appropriateness shall become null and void.

There is a thirty day right of appeal of this decision by the owner of the property or by any party aggrieved, pursuant to Cape Charles Zoning Ordinance Section 8.34.

Kathy Glaser

10/16/2025

Tracy Outten

10/16/2025

Chair—Historic District Review Board

Date

Planning/Zoning Assist.: Preservation & Zoning Administrator

Date



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Colors (29)



Profile (5)

Finish (2)

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Historic District Review Board Staff Report

Agenda Title: 614 Peach Street

Agenda Date: May 19, 2026

Prepared by: Tracy Outten, Planning/Zoning Assistant – Preservation & Zoning Administrator

Reviewed By: Rick Keuroglan, Town Manager

Date: May 7, 2026

Applicant: QS LLC, representing the owner, Loelyn Renovations, LLC

Type Of Application: Pre-Application/Certificate of Appropriateness

Site Address: 614 Peach Street

Work to be Performed: renovations and construction of new additions

Tax Map: 83A1-1-67A

Current Zoning: R-1

Lot Size: 3,253 sq. ft.

Historic Register: NOT LISTED

Description: NA

Accessory Structure: NA

Date Application Received: April 6, 2026

Pre-Application Meeting: May 19, 2026

Date Application Deemed Complete: April 6, 2026

Legal Deadline: HDRB Decision (90 Days from Complete Application): July 6, 2026

Overview:

The applicant is seeking to: (1) renovate the existing single-family home as follows: (a) replace the existing windows with new vinyl 1/1 windows; (b) replace the existing metal doors with new fiberglass doors; and (c) rebuild the existing enclosed front porch to be open; (2) construct the following: (a) a 16.25' x 10' (162.5 sq. ft.) rear porch on the existing structure, (b) an 8' x 22.2' (177.6 sq. ft.) side addition, and (c) a 13.75' x 10' (137.5 sq. ft.) rear porch on the new side addition on the single-family home. Also, included in this application is the installation of concrete to finish the existing driveway. Any new additions must be compatible, sympathetic, and complementary to existing buildings.

Aerial Map:



Materials:

Renovations:

Door: 4-lite/1-panel Fiberglass

Window: Anderson Series 100: 1/1 Fiberglass

Front Porch: Roof: Architectural Shingle; Ceiling: Vinyl Beadboard; **Decking:** AZEK Tongue & Groove; **Columns:** 8' x 8" Square Fibercast; Baluster – Square Composite, Front: 8' sections, 36" H; Railings: AZEK Premier; **Posts:** 4 x 4 between rail sections; **Post Caps:** 4" x 4" **Steps:** 8" x 11" x 6' AZEK; **Skirting:** 1 x 6 Vinyl Privacy Lattice

Addition:

Roof: Pitch: 8:12; Architectural Shingle

Doors: NEED INFORMATION FOR GARAGE AND REAR

Windows: Anderson Series 100: 1/1 Fiberglass

Siding: Vinyl

Rear Porches: Roof: Architectural Shingle; Ceiling: Vinyl Beadboard; **Decking:** 5-1/4 x 6 AZEK Boards; **Columns:** 8' x 8" Square Fibercast; **Baluster:** Square Composite, Front: 8' sections, 36" H; Railings: AZEK Premier; **Posts:** 4 x 4 between rail sections; **Post Caps:** 4" x 4" **Steps:** 8" x 11" x 6' AZEK; **Skirting:** 1 x 6 Vinyl Privacy Lattice

Staff Analysis:

Zoning Compliance:

The property is a legal, non-conforming use. The proposed project seeks to renovate the existing single-family dwelling and to construct a new 6' x 22' (132 sq. ft.) side addition and a rear porch on the single-family dwelling. Although the finished driveway does not meet Town Code Chapter 32, Article IV, Section 32-95 (k) (1) (a), it was pre-existing. Zoning Compliance has been achieved based upon this application to the HDRB.

Any property within the Historic District Overlay is required to meet the Historic District Guidelines, which are superimposed on the underlying zoning district regulations.

Historic District Guidelines:

Section 5.12: Additions

Section 7.1: Alternative Materials

Section 7.4: Non-Contributing Considerations

Staff Recommendation:

Staff requests that the HDRB review the applicant's application materials and determine whether the proposed renovations, additions, and materials for the single-family dwelling are in keeping with the Guidelines of the Historic District and reflect the character and historic appearance of the neighborhood.

Staff is prepared to assist in developing a motion, if needed.

The Historic District Review Board makes the final determination on whether or not a Certificate of Appropriateness will be issued for this project and may impose conditions on an approval.

If approved, a Certificate of Appropriateness shall expire of its own limitation six (6) months from the date of issuance if the work authorized thereby is not commenced by the end of such six (6) month period; and further, any such certificate shall also expire and become null and void if such authorized work is suspended or abandoned for a period of six (6) months after being commenced.

Attachments:

Attachment 1: Total Lot Coverage Sheet

Attachment 2: Application and Supporting Documents

Total Lot Coverage Breakdown -		
Address: 614 Peach Street	Tax Map # 83A1-1-67A	NOTES
Lot Size	3,253	
Structure	Square Footage	
House	602.64	
Front Porch	97.50	
Front Steps	12.00	
Front Walkway - Concrete	0.00	not on property
Rear Screened-In-Porch	0.00	
Misc. Concrete	0.00	
Driveway Concrete	0.00	not on property
Accessory Structure & Ramp	0.00	
Total	712.14	
Total Lot Coverage	21.89%	
PROPOSED		
House Rear Porch & Steps	207.19	
Garage	177.60	
Garage Covered Rear Porch	137.50	
Driveway Concrete	72.00	on property
Proposed Total	594.29	
Existing Total	712.14	
Total Proposed + Existing	1,306.43	
Total Lot Coverage	40.16%	
NOT INCLUDED		



Certificate of Appropriateness Application Renovation

Planning & Zoning Department
412 Tazewell Avenue
Cape Charles, VA 23310
757-331-3259 x31
planningtech@capecharles.org

Section 7, Item A.

Revised 02/2026	
Taxes	Paid
Violations	NA
Fee	\$500 PD
Decision	HDRB

Budget Code: HISTF 100-3100-1100

Budget Code VIOLATIONS: PERMZ 100-3100-1370

PART 1: APPLICATION NOTES

A Certificate of Appropriateness is required for all applications for zoning clearances and permits involving any exterior alteration, modification, restoration, reconstruction, demolition, new construction or moving of a property within the Cape Charles Historic District Overlay.

Minor Exterior Work* is exterior maintenance and repair, replacement of missing or broken windowpanes, roofing shingles, slates, tiles, porch floors, posts, rails, or shutters where no substantial change to design or material is proposed and other minor changes that do not materially change the historic characteristics of the building may be reviewed by the Zoning Administrator. Upon approval the applicant is responsible for confirming and obtaining all necessary building permits.

Major Exterior Work: is any alteration of the architectural style of a structure or its significant architectural elements, modifications, additions, and any major or minor work not eligible for administrative review must be reviewed and approved* by the Historic District Review Board. Upon approval the applicant is responsible for confirming and obtaining all necessary building permits.

Note: A pre-application meeting is available upon request prior to submitting this application.

The following documents must be submitted to the Town before this application can be reviewed. In addition to these documents, the COA application and requested supporting information relevant to the applicable sections must be deemed complete by department staff prior to being evaluated.

- A) Zoning Clearance Application
- B) Photos of existing condition
- C) Owner Permission Affidavit
- D) Payment of COA Fee (Residential – Minor \$75, Major \$150 / \$500 OR Commercial/Commercial Residential - \$1,000)
- E) Site Plan/Survey
- F) Material Specifications
- G) Tree Permit Application

Owner signature: _____

Date: _____

PART 2: PROPERTY INFORMATION

Property Address: 614 Peach St, Cape Charles, VA 23310

Tax Map #: 83A1-1-67A

Is there an active Certificate of Appropriateness on this property? No Yes _____ Date

Zoning District: TCC

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company: Loelynn Renovations, LLC

PART 4: APPLICANT INFORMATION

Check here if the applicant is owner. (If applicant is not the property owner, an Owner's Permission Affidavit must be attached.)

Name and/or Company: QS, LLC

PART 5: PROJECT INFORMATION – Describe in detail proposed work.

(If any tree removal is being proposed a Tree Permit Application must be completed):

PART 6. ALTERATIONS, REPAIRS OR ADDITIONS

Select the type of work to be performed (check all that apply):

- Addition
 Doors
 Windows
 Masonry
 Porch
 Roofs
 Siding
 Steps/Stoop & Railings
 Trim Work
 Fence or Wall
 Partial demolition
 Hardscaping
 Appurtenances
 Other:

A. ADDITION Not applicable SEE SECTION 5.6 or 5.12 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach a diagram; Survey/Site Plan is required):

Stories: 2 Building height: 28' Footprint: 506 sq ft additional structures Gross square footage: 1507

Complete all sections below that apply to your addition and supply elevation drawings.

B. ROOF Not applicable SEE SECTION 4.2, 5.2, or 5.8 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: New Repair % of roof structure ____ Reroofing: In kind ____ Different in style or material ____
 Add/Repair Gutters and downspouts Solar Panels Other Solar Installation

Location (Pictures of existing condition):

Existing Roof	Proposed Roof
Existing Condition: <input type="checkbox"/> Original <input checked="" type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work: <u>New roof</u>
Existing Material: <u>Shingle</u>	Proposed Material: <u>Architectural shingle</u>
Pitch: _____	Pitch: <u>8-12</u>
Gutters & Downspouts: (Pictures of Location & Material Specs)	Solar: (Pictures of Location & Material Specs)
Proposed Work: <u>Remove and extend</u>	Proposed Work: _____
Proposed Material: <u>Shingle</u>	Proposed Material: _____
Other / Additional Notes: _____	

C. DOORS Not applicable SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of doors to be: Added: 2 Removed: ---
 Repaired: _____ Replaced: In kind 2 Different in style or material 2

Attach a diagram of the house exterior with all doors numbered. Add documentation for each additional door.

Existing Door	Proposed Door
Door 1: Complete a separate Section C for each door being modified. Original to the home: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not Sure	Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Repaired <input checked="" type="checkbox"/> Replaced
Existing Material: <u>Metal</u>	Proposed Material: <u>Fiberglass</u>
Dimensions: Width _____ Height _____	Dimensions: Width <u>3'0"</u> Height <u>6'8"</u>
Configuration with picture (i.e., glass panes, divisions, decorative details & panels):	Configuration with picture (i.e., glass panes, divisions, decorative details & panels):

Indicate the reason for change: Disrepair

D. WINDOWS Not applicable SEE SECTION 4.5, 5.5, or 5.11 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Number of windows to be: Added: _____ Removed: _____
 Repaired: _____ Replaced: In kind Different in style or material _____

Minimum Guidelines: Window Sill – thickness of 1-1/2" and Window Casing or Trim – thickness of 3-1/2"

Attach a diagram of the house exterior with all windows numbered. Add documentation for each additional window.

Existing Windows	Proposed Windows
Window 1: Complete a separate Section D for each window being modified if it is a different size, configuration, etc.	Work to be completed: <input type="checkbox"/> Added <input type="checkbox"/> Removed <input type="checkbox"/> Repaired <input checked="" type="checkbox"/> Replaced
Original to the home: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure	
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture
Width: 28" Height: 54" Depth:	Width: 3'0" Height: 5'0" Depth:
Existing Material:	Proposed Material: Vinyl
Sill: Length: Thickness: Depth:	Sill: Length: 3' Thickness: 2" Depth:
Existing Material:	Proposed Material:
Casing / Trim: Width: Height: Depth:	Casing / Trim: Width: Height: Depth:
Existing Material:	Proposed Material:
Shutters: Original: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Location Picture)	Shutters: <input type="checkbox"/> Repair <input type="checkbox"/> Replace <input type="checkbox"/> New (Attach Location Picture)
Existing Material:	Proposed Material:
Indicate the reason for change:	

E. PORCHES Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

New materials should match the historic material, composition, shape, size, and other visual qualities.

Work to be done: Repair flooring Repair ceiling Repair columns Repair/Add Skirting Repair/Add Screening
 Flooring = Alter Replace Repair Columns = Alter Replace Repair
 Balustrade = Alter Replace Repair Ceiling = Replace Repair Skirting = New Replace Repair

Location (Attach pictures for all work including existing and proposed; Survey may be requested):

FLOORBOARDS: Number of boards to be: _____ Repaired Replaced _____ Altered _____
Replacement of flooring should match the historic floorboard orientation. Replacement of an entire porch floor, ensure the new floor slopes away from the building.

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material: Wood	Proposed Material: Azek
Dimensions: Length: Width: Depth:	Dimensions: Length: Width: Depth:
CEILING	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material: Vinyl beaded
COLUMNS	
Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material & Design:	Proposed Material & Design: Fibercast
Existing Dimensions: Height: Width: Diameter:	Proposed Dimensions: Height: Width: Diameter:

CONTINUE COMPLETING THIS SECTION ON PAGE 4

BALUSTRADE

Existing Condition: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material: <i>Azek</i>
Existing Dimensions: Height: Width: Diameter:	Proposed Dimensions: Height: <i>4'</i> Width: Diameter:
Existing Style / Design:	Proposed Style / Design: <i>Premier rail</i>

SCREENING

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work: <input type="checkbox"/> New <input type="checkbox"/> Replace <input type="checkbox"/> Repair
Existing Material:	Proposed Material:

SKIRTING

Existing Condition: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed Work: <input type="checkbox"/> New <input checked="" type="checkbox"/> Replace <input type="checkbox"/> Repair
Existing Material: <i>Concrete</i>	Proposed Material: <i>Vinyl lattice</i>

If replacing any item above, indicate the reason for replacement:
Remodeling the porch style to conform to HR approved material

If altering any item above, describe any proposed change (material, size, etc.):
Changing to fibercast columns, azek flooring, vinyl beaded ceiling + azek

F. STEPS/STOOPS/RAILINGS Not applicable SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES *Premier rail*

Location (Attach pictures; Survey may be requested):

Number of Steps to be: Repaired 2 Replaced Altered

Existing Condition: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material:	Proposed Material: <i>Azek</i>
Dimensions: Rise: Run: Tread Width:	Dimensions: Rise: <i>8"</i> Run: <i>11"</i> Tread Width: <i>6"</i>

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

Stoop to be: Repaired Replaced Altered

Existing Condition: <input type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material & Size:	Proposed Material & Size:

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

Number of Railings to be: Repaired Replaced Altered

Location (Attach pictures; Survey may be requested):

Existing Condition: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	Proposed
Existing Material: <i>Siding</i>	Proposed Material: <i>Azek</i>
Existing Dimensions: Height: Width: Diameter:	Proposed Dimensions: Height: <i>4'</i> Width: <i>1"</i> Diameter:

Existing Style / Design: *Sided front porch* Proposed Style / Design: *Azek premier rail*

If replacing, indicate the reason for replacement. If altering, describe any proposed change (material, configuration, size, etc.):

G. SIDING Not applicable **SEE SECTION 4.4, 5.4, or 5.9 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: Minor Repair Full Re-Siding (same material) Full Re-Siding (Change of material)

Location (Attach diagram & pictures):

Existing Siding	Proposed Siding
Original to the home: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
Existing Material: <i>Vinyl</i>	Proposed Material: <i>Hardi</i>
Dimensions: Thickness: Width:	Dimensions: Thickness: <i>5/16"</i> Width: <i>8 1/4" w/ 1" exposure</i>
Indicate the reason for change, e.g., underlying material condition, rot: <i>Want to upgrade to Hardi siding</i>	

H. TRIM WORK Not applicable **SEE SECTION 4.4, 5.4, or 5.10 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: Minor Repair Alteration

Location (Attach diagram & pictures):

Existing Trim	Proposed Trim
Existing Condition: <input checked="" type="checkbox"/> Original <input type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	
Existing Material: <i>Vinyl</i>	Proposed Material: <i>Azek trim</i>
Dimensions: Width: Height: Depth:	Dimensions: Width: Height: <i>4"</i> Depth:
Style / Design: <i>Vinyl</i>	Style / Design: <i>Azek flat style trim</i>
Reason for repair or alteration (change of material or design): <i>to upgrade to approved trim style</i>	

I. MASONRY Not applicable **SEE SECTION 4.3 or 5.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Type of work: New foundation Substantial Reconstruction Minor Repair Repointing

Location (Attach diagram & pictures):

Existing Masonry	Proposed Masonry
Existing Condition: <input type="checkbox"/> Original <input checked="" type="checkbox"/> Not Original <input type="checkbox"/> Not Sure	
Existing Material: <i>block</i>	Proposed Materials: <i>block with stucco face</i>
Existing mortar: Joints:	Mortar to be used: Mortar joints:
Other / Additional Notes: (Unpainted masonry cannot be painted.)	

Existing Chimney	Proposed Chimney
Show location and document conditions with photographs	<input type="checkbox"/> Repair <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Add a chimney cap
Indicate the reason for change and materials: <i>Separate application submitted for chimney removal</i>	

J. HARDSCAPING Not applicable **SEE SECTION 9.1 OF THE HISTORIC DISTRICT DESIGN GUIDELINES**

Location (Attach Site Plan/Survey & pictures):

<input type="checkbox"/> Driveway:	Length:	Width:	Materials:
<input type="checkbox"/> Walkway:	Length:	Width:	Materials:
<input type="checkbox"/> Other Paving:	Length:	Width:	Materials:

K. FENCE OR WALL Not applicable SEE SECTION 9.2 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Type of work: New Repair % of structure Replace In kind Different in style or material

Location (include survey showing location, setbacks, and height)

Existing Material:	Proposed Material
Height:	Height:
Describe the style:	Describe the style:

L. DECKS & PATIOS Not applicable SEE SECTION 9.3 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach Site Plan/Survey & pictures):

Deck: Length: 10' Width: 20' Materials: TimberTech Azek 5/4 decking
 Patio: Length: Width: Materials: Azek Premier handrail, azek wrapped posts + screeneeze system

M. APPURTENCES Not applicable SEE SECTION 9.4 OF THE HISTORIC DISTRICT DESIGN GUIDELINES

Location (Attach Site Plan/Survey & pictures):

New Repair Replacing Other:

Outdoor Shower: <input type="checkbox"/> Enclosed Length: Width:
Material: Foot Pad Material:
Other, describe:
Dimensions: Material
Other:
Dimensions: Material

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct, and that the construction or improvements will conform to the regulations in the Virginia Statewide Building Code, all pertinent Town Codes, including fire, sewer and water codes, and private building restrictions, if any, which may be imposed on the property by deed. Furthermore, I certify that the changes to the improvement before or during construction will be provided to the Zoning Administrator and Building Official before such changes are constructed.

Applicant's signature: Heather Behrens Date: 2/24/26

Zoning Administrator's signature: _____ Date: _____

Town Code Chapter 32, Article VIII, Section: 32-226



Owner Affidavit for Permission to Represent

Planning & Zoning Department
2 Plum Street; Cape Charles, VA 23310
757-331-3259 x24

planningtech@capecharles.org

Revised 03/2022	
Section 7, Item A.	
Taxes	
Violations	
Fees	
Decision	

PART 1. APPLICATION NOTES

Use this form to give permission for a contractor, architect, or other individual to represent the owner of a property in matters within the Town of Cape Charles.

PART 2: PROPERTY INFORMATION

Property Address: **614 Peach St, Cape Charles, VA 23310**

Tax Map #: **83A1-1-67A**

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company: **LoeLynn Renovations, LLC**

PART 4: REPRESENTATIVE INFORMATION

Name and/or Company: **Heather Behrens - QS LLC**

to file documents on my behalf

To represent me in meetings with Town officials

Name and/or Company:

Mailing Address:

Phone Number:

Email:

to file documents on my behalf

To represent me in meetings with Town officials

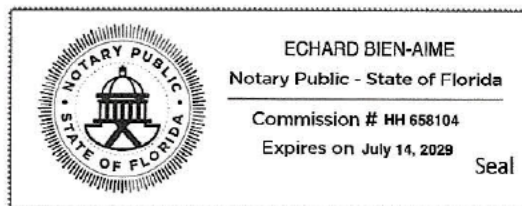
Signature of owner: Dustin Summers Date: 01/23/2026

State of Florida, County of Saint Lucie
The foregoing instrument was acknowledged before me this 23rd day of January, 20 26, by Dustin Summers (name of person acknowledged)

Signature of Notarial Officer: Echard bien-aime

Notary Registration number: HH 658104

My commission expires: 07/14/2029



Current 11

Section 7, Item A.



Current con...

Section 7, Item A.



Current condi

Section 7, Item A.



Current c

Section 7, Item A.



Proposed renovation

Section 7, Item A.



QS LLC

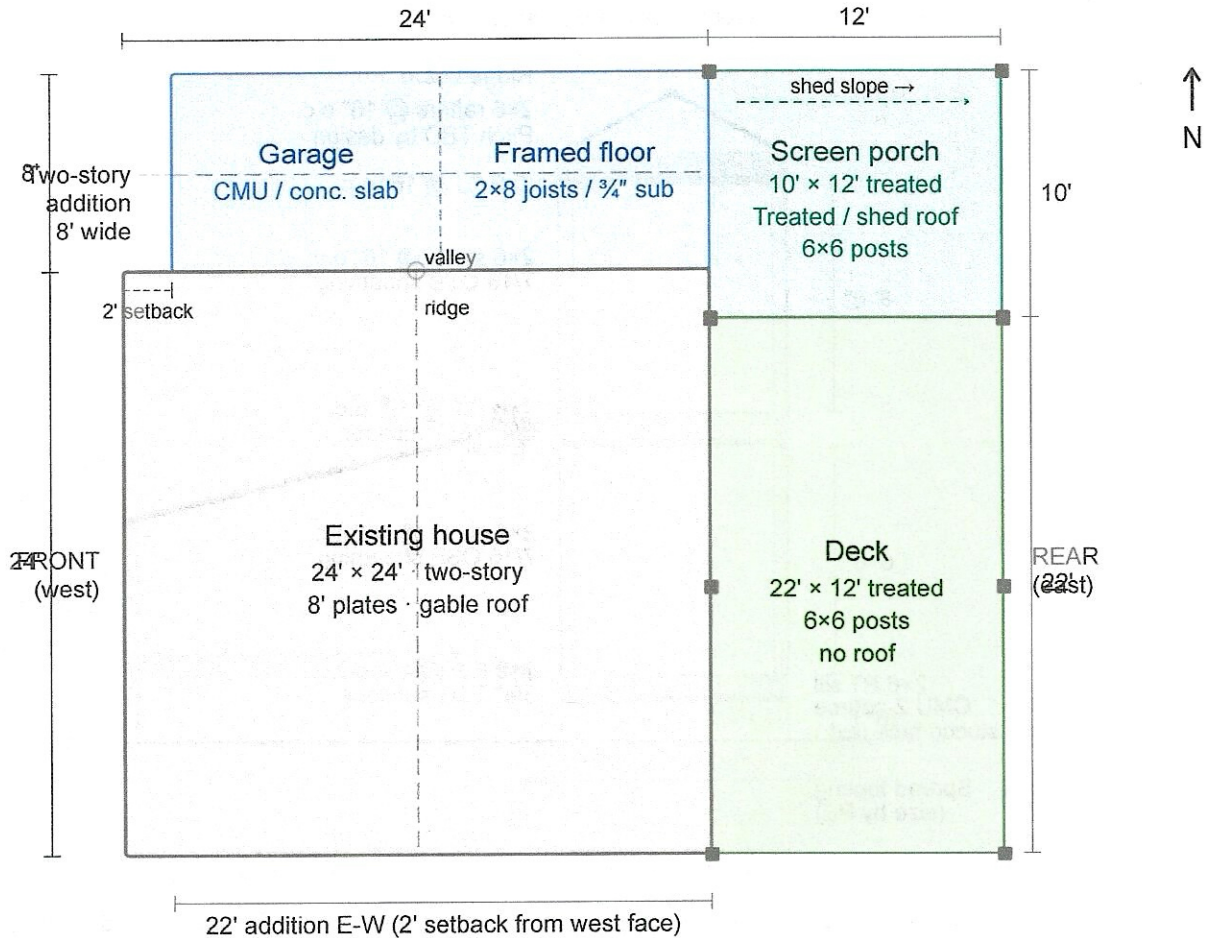
Class A General Contractor · Lic. #2701049002
Cheriton, Virginia · Eastern Shore

Site Plan Schematic — Plan View

Two-story addition + screened porch + deck · North up

Sheet 1 of 3

Scale: approx. 1" = 12px
Project: [Address TBD]



Addition: 2x CMU stem w/ stucco face · 2x6 ext. walls · 7/16 sheathing · 2x8 CJ & rafters · gable perp. to h
Rear: 6x6 treated posts throughout · screen porch 2x6 framing / 2x8 rafters · shed roof ties into addition E v
■ = 6x6 post corners (typical) · intermediate post spacing TBD per engineer · ridge lines shown dashed

QS LLC

Class A General Contractor · Lic. #2701049002
Cheriton, Virginia · Eastern Shore

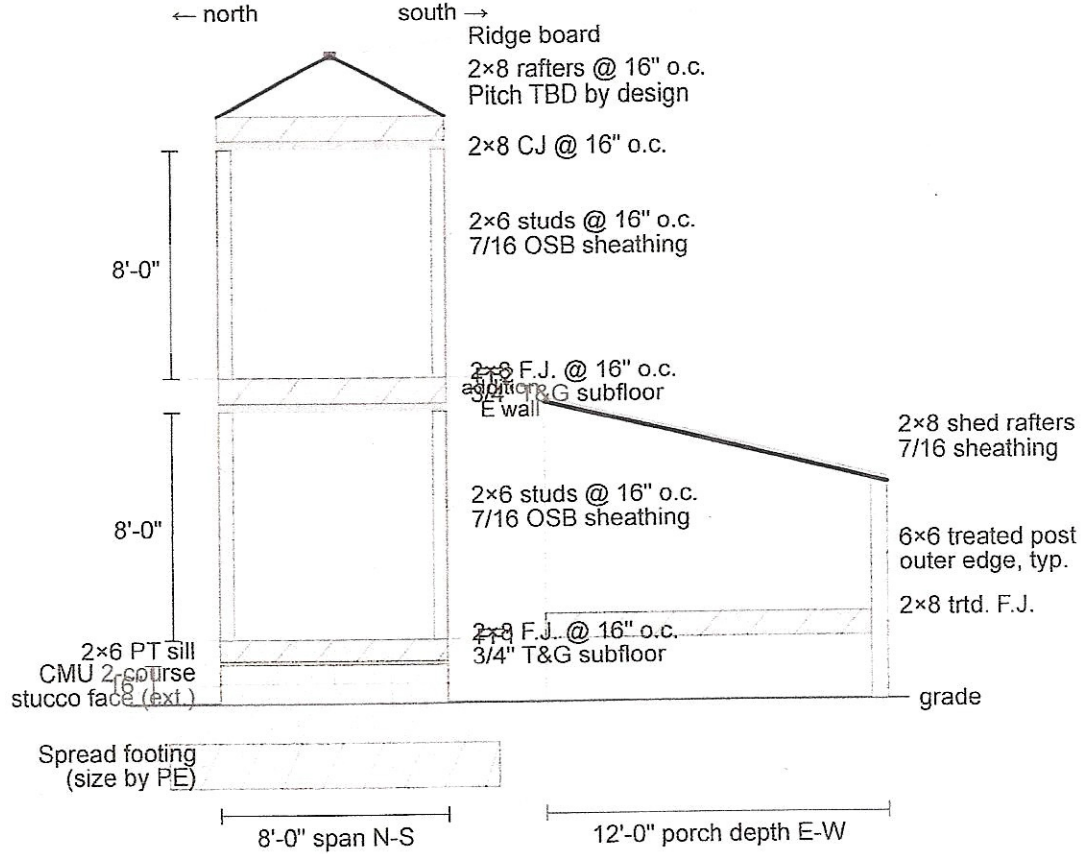
Framing Section — N-S Cut, Looking East

Two-story addition (8' span) · screened porch E-W section at right

Sheet 2 of 3
Scale: approx. 1" = 14px
Project: [Address TBD]

Addition framing section — N-S cut, looking east

8' span · 2-story · screened porch E-W section at right



Schematic only — pitch, member sizes, bearing & connections require PE stamp. Stud spacing shown typic

QS LLC

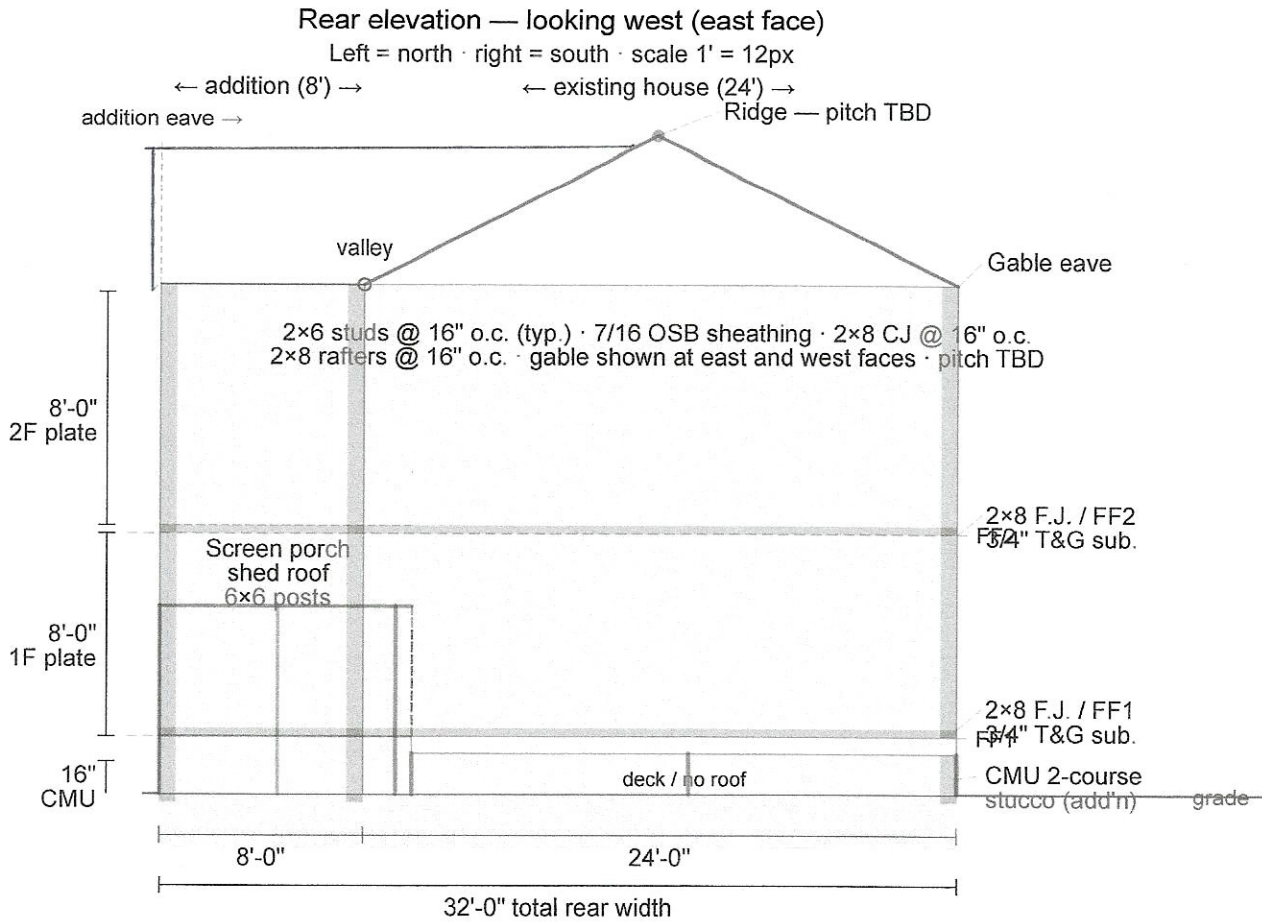
Class A General Contractor · Lic. #2701049002
Cheriton, Virginia · Eastern Shore

Rear Elevation — East Face Looking West

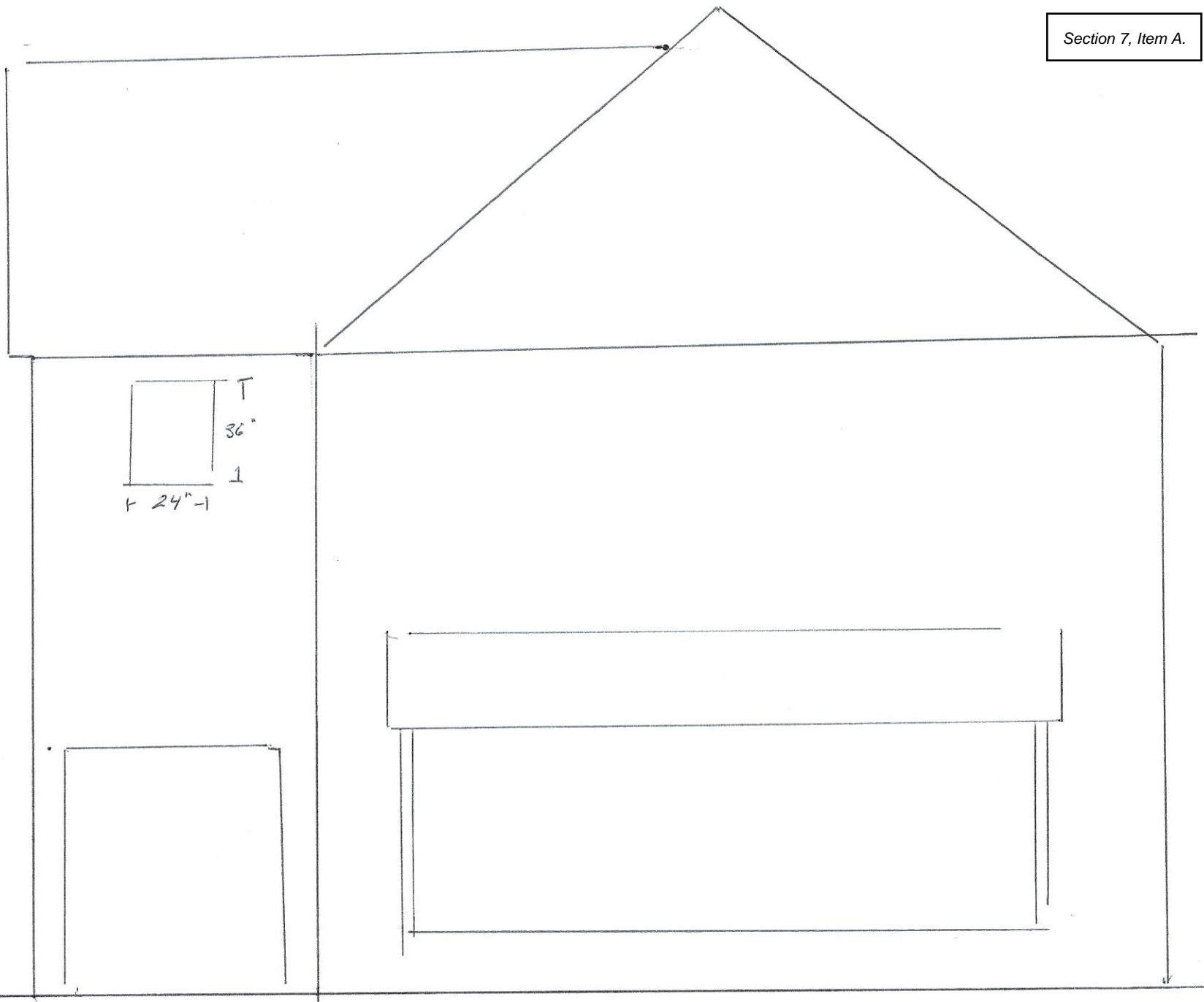
Left = north · right = south · two-story addition + house + screen porch + deck

Sheet 3 of 3

Scale: approx. 1" = 12px
Project: [Address TBD]

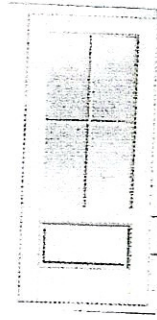
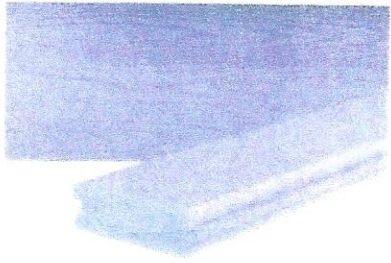


Rear elevation schematic only. Window/door openings, headers, and connection details TBD. All framing require



614 PA Materials

Timbertech
Azek tongue & groove
porch
flooring

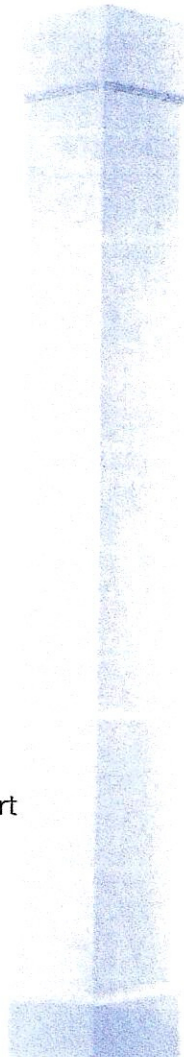


Exterior
doors

7" exposure Hardi lap siding

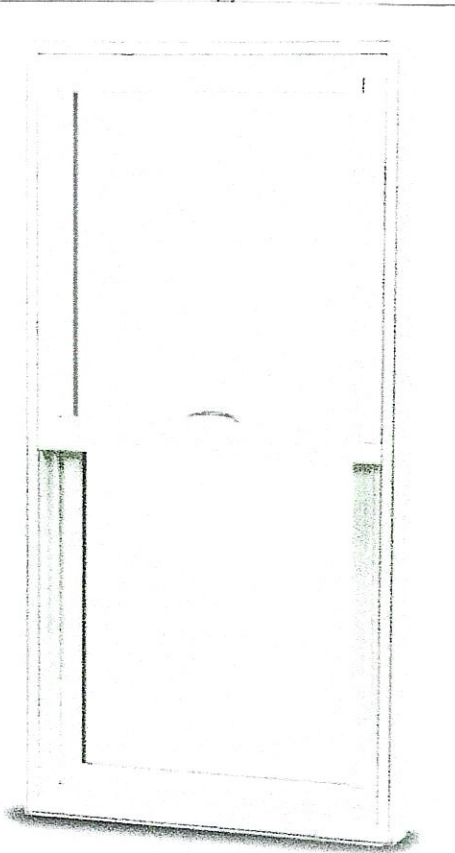


GAF
Architectural shingle



8" Fibercast
column

5 1/4 x 6
Azek
decking
Anderson
100
series
windows



part

Azek Premier handrail

top



4" X 4" Cap on or pinch to expan

4x4
posts between
rail sections

Composite Balusters

8' sections on front 36" height

Below deck and porch to be vinyl privacy lattice with 1" holes





Historic District Review Board Staff Report

Agenda Title: Tax Map 83A3-1-563A on Mason Avenue

Agenda Date: May 19, 2026

Prepared by: Tracy Outten, Planning/Zoning Assistant – Preservation & Zoning Administrator

Reviewed By: Rick Keuroglan, Town Manager

Date: May 7, 2026

Applicant: Arnold Fuog and Maureen Welch

Type Of Application: Pre-Application/Certificate of Appropriateness

Site Address: Mason Avenue

Work to be Performed: to construct two accessory structures

Tax Map: 83A3-1-563A

Current Zoning: CR

Lot Size: 4,502 sq. ft.

Historic Register: NOT LISTED

Description: NA

Accessory Structure: NA

Date Application Received: April 7, 2026

Pre-Application Meeting: May 19, 2026

Date Application Deemed Complete: April 17, 2026

Legal Deadline: HDRB Decision (90 Days from Complete Application): July 16, 2026

Overview:

The applicant is seeking to: (1) construct two accessory structures, 8' x 12' (96 sq. ft.) and 16' x 24' (384 sq. ft.) for commercial use; and (2) install shells on half of the property. Although this lot is currently vacant, new construction should be compatible, sympathetic, and complementary to existing buildings.

Aerial Map:



Materials:

Front Accessory Structure (Office) 96 sq. ft.: Roof: Pitch: 4:12 Shingle; Siding: T1-11; Door: 36" x 80" Wood panel; Windows: 4/4, 2' x 3' Wood; Trim: Wood

Rear Accessory Structure 384 sq. ft.: Roof: Pitch: 4:12 Metal; Siding: T1-11; Door: Rampage 48" x 72" Wood; Windows: 4/4, 2' 6" x 4' 6" x 2' 6" vinyl; Trim: Wood

Lot: Shell

Staff Analysis:

Zoning Compliance:

The property is a legal, non-conforming use. The proposed project seeks to construct two accessory structures, 8' x 12' (96 sq. ft.) and 16' x 24' (384 sq. ft.), and install 2,155 sq. ft. of shell on the commercial residential lot. Zoning Compliance has been achieved based upon this application to the HDRB.

Any property within the Historic District Overlay is required to meet the Historic District Guidelines, which are superimposed on the underlying zoning district regulations.

Historic District Guidelines:

Section 6.2: Accessory Structures Associated with Noncontributing Primary Buildings

Section 7.1: Alternative Materials

Section 7.4: Non-Contributing Considerations

Staff Recommendation:

Staff requests that the HDRB review the applicant's application materials and determine whether the proposed construction and materials for the commercial residential lot are in keeping with the Guidelines of the Historic District and reflect the character and historic appearance of the neighborhood.

Staff is prepared to assist in developing a motion, if needed.

The Historic District Review Board makes the final determination on whether or not a Certificate of Appropriateness will be issued for this project and may impose conditions on an approval.

If approved, a Certificate of Appropriateness shall expire of its own limitation six (6) months from the date of issuance if the work authorized thereby is not commenced by the end of such six (6) month period; and further, any such certificate shall also expire and become null and void if such authorized work is suspended or abandoned for a period of six (6) months after being commenced.

Attachments:

Attachment 1: Total Lot Coverage Sheet

Attachment 2: Application and Supporting Documents

Total Lot Coverage Breakdown -		
Address: Mason Avenue	Tax Map # 83A3-1-563A	NOTES
Lot Size	4,502	
Structure	Square Footage	
House		
Front Porch		
Front Steps		
Front Walkway - Concrete		
Rear Screened-In-Porch		
Misc. Concrete		
Driveway Concrete		
Accessory Structure & Ramp		
Total		
Total Lot Coverage	0.00%	
PROPOSED		
Accessory Structure - Front	96.00	
Accessory Structure - Rear	384.00	
Shell Area (2,155 x .50)	1,077.50	These surfaces are considered 50% impervious re: CBPA
Proposed Total	1,557.50	
Existing Total	0.00	
Total Proposed + Existing	1,557.50	
Total Lot Coverage	34.59%	
NOT INCLUDED		

Revised 11/2025	
Taxes	Paid
Violations	NA
Fee	HDRB
Decision	



Certificate of Appropriateness Application

Accessory Structure

Planning & Zoning Department
412 Tazewell Avenue
Cape Charles, VA 23310
757-331-3259 x31

planningtech@capecharles.org

Budget Code: HISTF 100-3100-1100

PART 1: APPLICATION NOTES

A Certificate of Appropriateness (COA) is required for all applications for zoning clearances and permits involving any new construction, including accessory structures, within the Cape Charles Historic District Overlay. A pre-application meeting is available upon request prior to submitting this application. * The applicant is responsible for confirming and obtaining all necessary building permits after approvals.

The following documents must be submitted to the Town for review before this application can be reviewed. In addition to these documents, the COA application and requested supporting information must be deemed complete prior to being evaluated.

- Site Plan
- Elevations
- Zoning Clearance Application
- Photos of existing lot
- Renderings
- Photos of proposed materials
- Owner Permission Affidavit
- Payment of Fee
- Tree Permit Application

Owner signature:

Date:

PART 2: PROPERTY INFORMATION

Property Address:

Tax Map #: 563(Lot)

Is there an active Certificate of Appropriateness on this property? No Yes _____ Date

Zoning District: Historic

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company: Arnold Fuca / Maureen Welch

PART 4: APPLICANT INFORMATION

Check here if applicant is owner. (If applicant is not the property owner, an Owner's Permission Affidavit must be attached.)

Name and/or Company:

Mailing Address:

Phone Number:

Email:

PART 5: PROJECT INFORMATION

Proposed Project Description (If any tree removal is being proposed a Tree Permit Application must be completed.):

gots cart rental,
1) 8'x12' office/shed 960
1) 16x24/garage for storage of carts 384

PART 6. ACCESSORY STRUCTURE
 See Section 5.13 & 6 of the Historic District Design Guidelines
 Cape Charles Zoning Ordinance Section 4.1 (E)

Main Dwelling First Floor Building Area (sq ft): <u>NA.</u>		Height of Main Dwelling:	
Building Area (sq. ft.): <u>96</u>		Total Gross Floor Area (sq. ft.): <u>96</u>	
Distance from Main Structure (ft.):		Building width (ft.): <u>8</u>	
Building Height	Feet: <u>10'</u>	Stories: <u>1</u>	Roof pitch: <u>4/12</u>
A. Foundation	Material to be used if applicable:		
B. Roofing	Material to be used: <u>Asphalt</u>		
C. Siding	Material to be used: <u>wood</u>	Dimensions: <u>4x8 sheets</u>	
D. Doors	Width: <u>36"</u> Height: <u>8' x 80'</u> / <u>10' garage door</u>		
	Material and Configuration: attach a picture (i.e., glass panes, divisions, decorative details & panels)		
E. Windows <u>4 over 4</u> <u>3 windows</u> <u>on 8'x12'</u>	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.) attach a picture:		
	Material: <u>wood</u>		
	Width:	Height:	Depth:
F. Trim	Material to be used: <u>wood</u>		
	Dimensions:		

P

Annie

Describe how the proposed construction will relate to the architectural scale, massing, volumes, and styles represented within the historic district. Attach pictures of the neighborhood (e.g., adjacent buildings, streetscapes).

Standard Existing Buildings

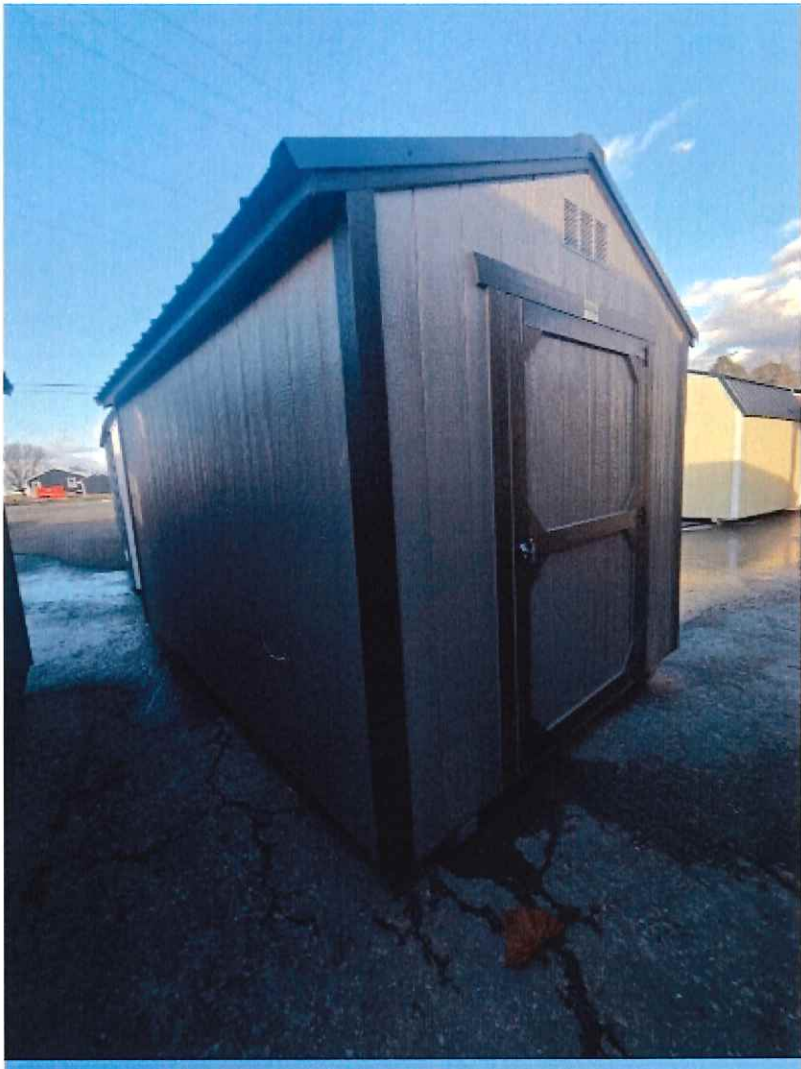
Indicate the proposed materials if not listed above, distinctive architectural features and ornamentation:

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct, and that the construction or improvements will conform to the regulations in the Virginia Statewide Building Code, all pertinent Town Ordinances, including fire, sewer and water ordinances, and private building restrictions, if any, which may be imposed on the property by deed. Furthermore, I certify that the changes to the improvement before or during construction will be provided to the Zoning Administrator and Building Official before such changes are constructed.

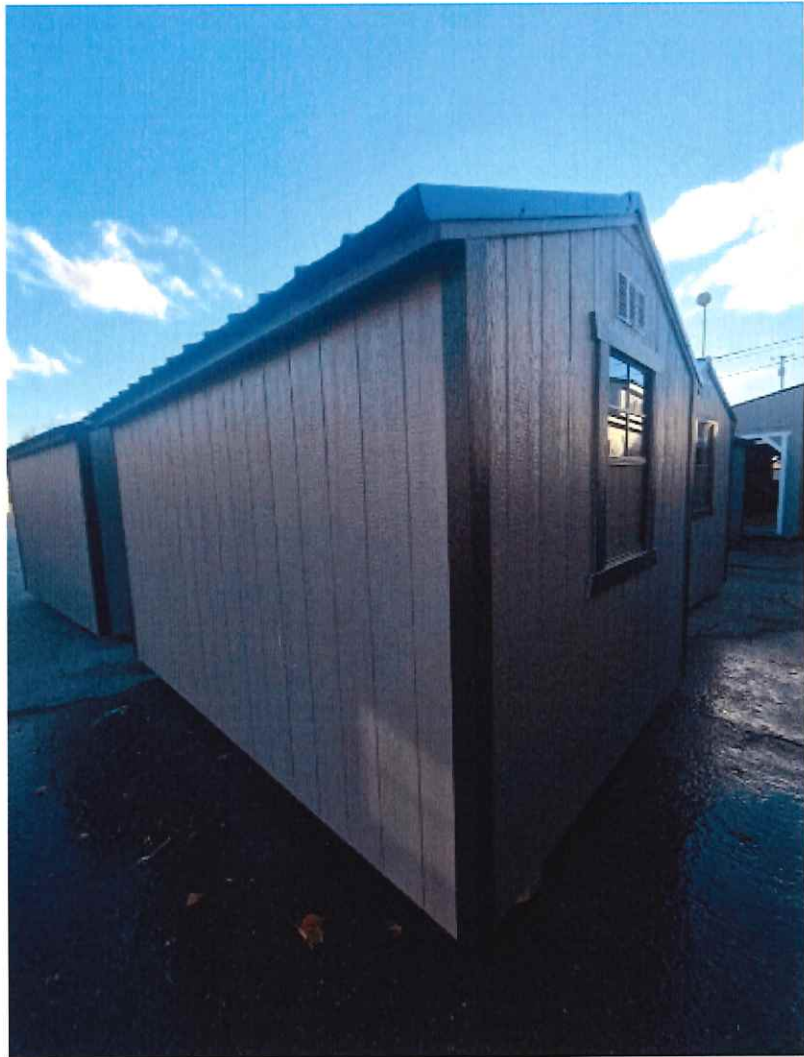
Applicant's signature: Annie C. Fung Date: March 18-2006

Zoning Administrator's signature: _____ Date: _____

Zoning Ordinance Article VIII Section: 32-226



office



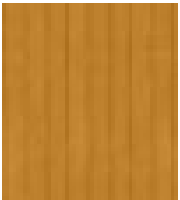
office

8' x 12' (96 sq. ft.) Accessory Structure (Office)

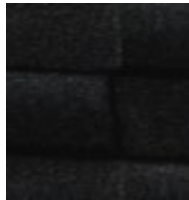


Material Specifications

Siding & Trim: T-111



Roof: Shingle



Windows: 4/4, 2' x 3' Wood



Door: 36" x 80" Wood Panel Door



Revised 02/2026	
Taxes	✓ PDJO
Violations	NA
Fee	\$
HDRB Decision	



Certificate of Appropriateness Application Accessory Structure

Planning & Zoning Department
412 Tazewell Avenue
Cape Charles, VA 23310
757-331-3259 x31

planningtech@capecharles.org

Budget Code: HISTF 100-3100-1100

PART 1: APPLICATION NOTES

A Certificate of Appropriateness (COA) is required for all applications for zoning clearances and permits involving any new construction, including accessory structures, within the Cape Charles Historic District Overlay. A pre-application meeting is available upon request prior to submitting this application. * The applicant is responsible for confirming and obtaining all necessary building permits after approvals.

The following documents must be submitted to the Town for review before this application can be reviewed. In addition to these documents, the COA application and requested supporting information must be deemed complete prior to being evaluated.

- Site Plan
- Elevations
- Zoning Clearance Application
- Photos of existing lot
- Renderings
- Photos of proposed materials
- Owner Permission Affidavit
- Payment of Fee
- Tree Permit Application

Owner signature:

Date:

PART 2: PROPERTY INFORMATION

Property Address:

Mason Avenue

Tax Map #:

83A3-1-503A

Is there an active Certificate of Appropriateness on this property? No Yes _____ Date

Zoning District:

CR

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company:

Arnold Fuog / Maureen Welch

PART 4: APPLICANT INFORMATION

Check here if applicant is owner. (If applicant is not the property owner, an Owner's Permission Affidavit must be attached.)

Name and/or Company:

Mailing Address:

Phone Number:

Email:

PART 5: PROJECT INFORMATION

Proposed Project Description (If any tree removal is being proposed a Tree Permit Application must be completed.):

golf cart rental business

1) 16x24 shed for cart storage 384 #

16x24

PART 6. ACCESSORY STRUCTURE
See Section 5.13 & 6 of the Historic District Design Guidelines
Cape Charles Town Code Chapter 32, Article IV, Section 32-91 (e)

Main Dwelling First Floor Building Area (sq ft):		Height of Main Dwelling: 12'	
Building Area (sq. ft.):		Total Gross Floor Area (sq. ft.): 384	
Distance from Main Structure (ft.):		Building width (ft.): 16'	
Building Height	Feet: 12'	Stories: 1	Roof pitch: 4/12
A. Foundation	Material to be used if applicable: on skids		
B. Roofing	Material to be used: metal		
C. Siding	Material to be used: T-111	Dimensions:	
D. Doors	Width: 4 Height: 6' ramp door		
	Material and Configuration: attach a picture (i.e., glass panes, divisions, decorative details & panels) see photos		
E. Windows	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.) attach a picture:		
	Material: Vinyl 4/4		
	Width: 2.6 x 2.6	Height: 2.6	Depth: 4"
F. Trim	Material to be used: wood		
	Dimensions: 1x4"		

Describe how the proposed construction will relate to the architectural scale, massing, volumes, and styles represented within the historic district. Attach pictures of the neighborhood (e.g., adjacent buildings, streetscapes).

Indicate the proposed materials if not listed above, distinctive architectural features and ornamentation:

I hereby certify that I have the authority to make the foregoing application, that the information given is true and correct, and that the construction or improvements will conform to the regulations in the Virginia Statewide Building Code, all pertinent Town Codes, including fire, sewer and water codes, and private building restrictions, if any, which may be imposed on the property by deed. Furthermore, I certify that the changes to the improvement before or during construction will be provided to the Zoning Administrator and Building Official before such changes are constructed.

Applicant's signature: Arnold Fuog Date: April 7-2026
 Zoning Administrator's signature: _____ Date: _____

Town Code Chapter 32, Article VIII, Section: 32-226

2
 24
 16

 144 384
 24

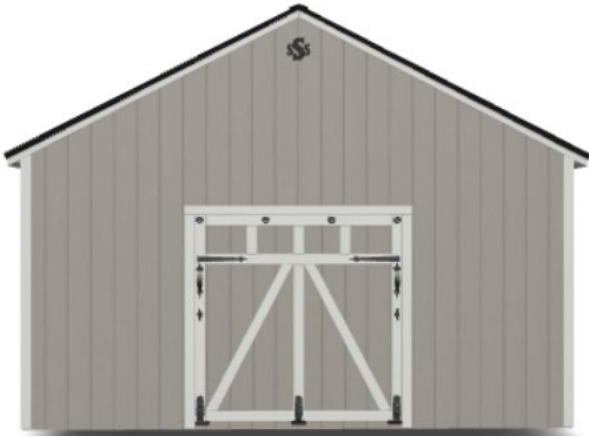


16' x 24'

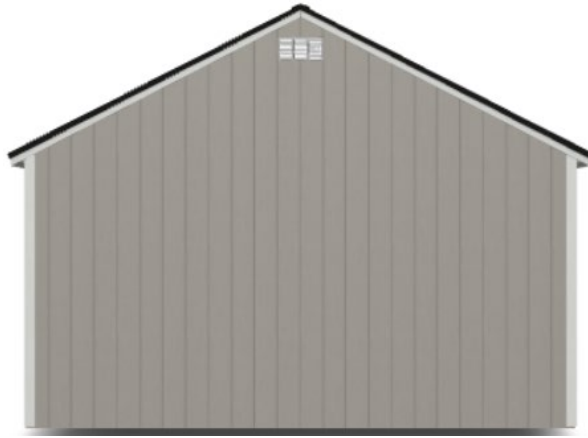
16' x 24' (384 sq. ft.) Accessory Structure (Cottage Shed)

Section 7, Item B.

Front



Back



Right



Left



Material Specifications

Siding & Trim: T-111

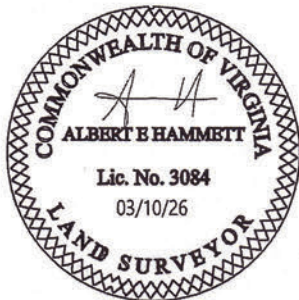
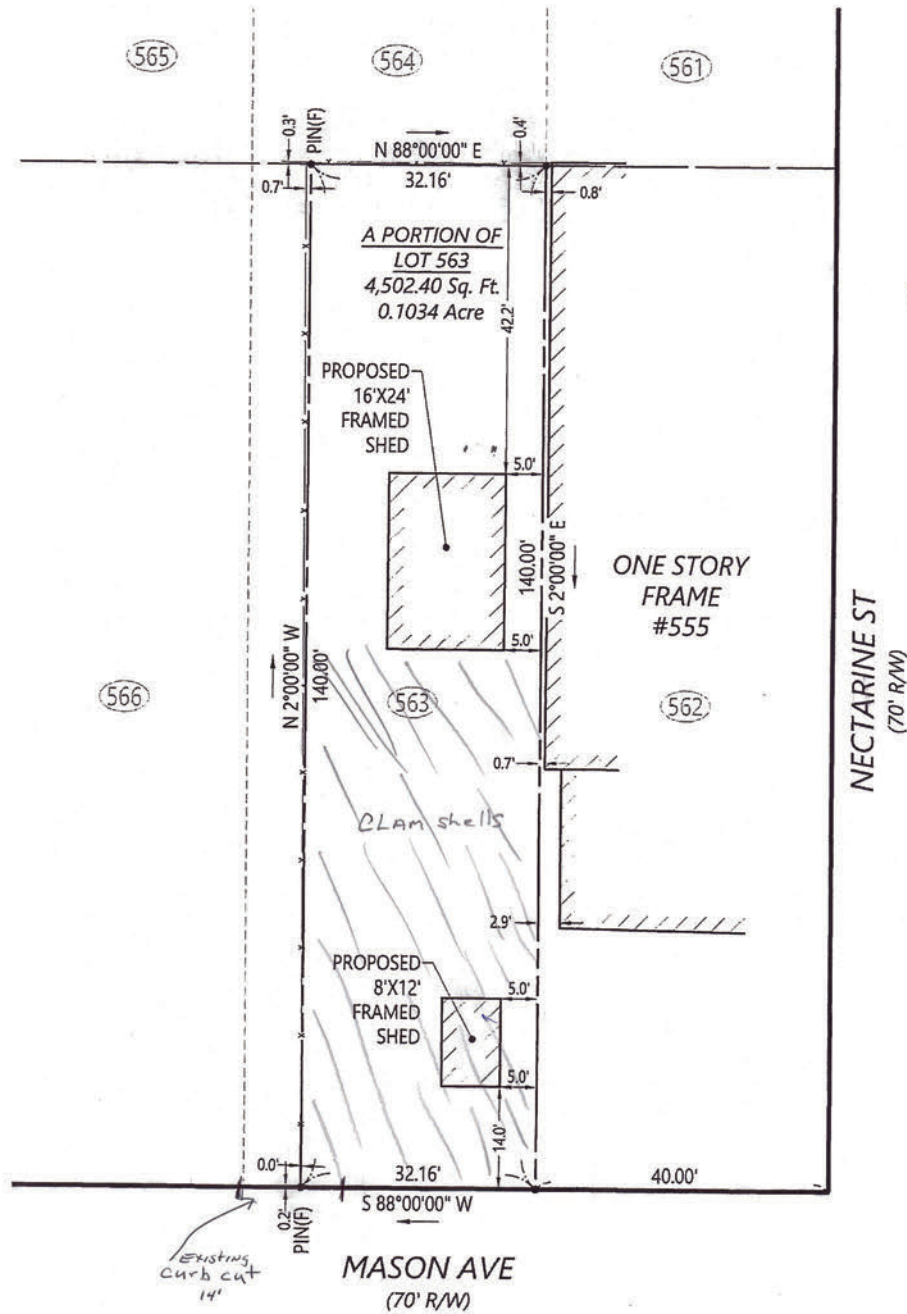
Roof: Metal



Windows: 4/4, 2' 6" x 2' 6" Vinyl; Shutters: Vinyl



Door: 4' x 6' Rampage Door Wood



BUILDING EXHIBIT
OF
A PORTION OF LOT 563
MAP
OF THE TOWN OF "CAPE CHARLES"
CAPE CHARLES, VIRGINIA
Deed Book 41 / Page 484
FOR
ARNOLD FUOG & MAUREEN WELCH



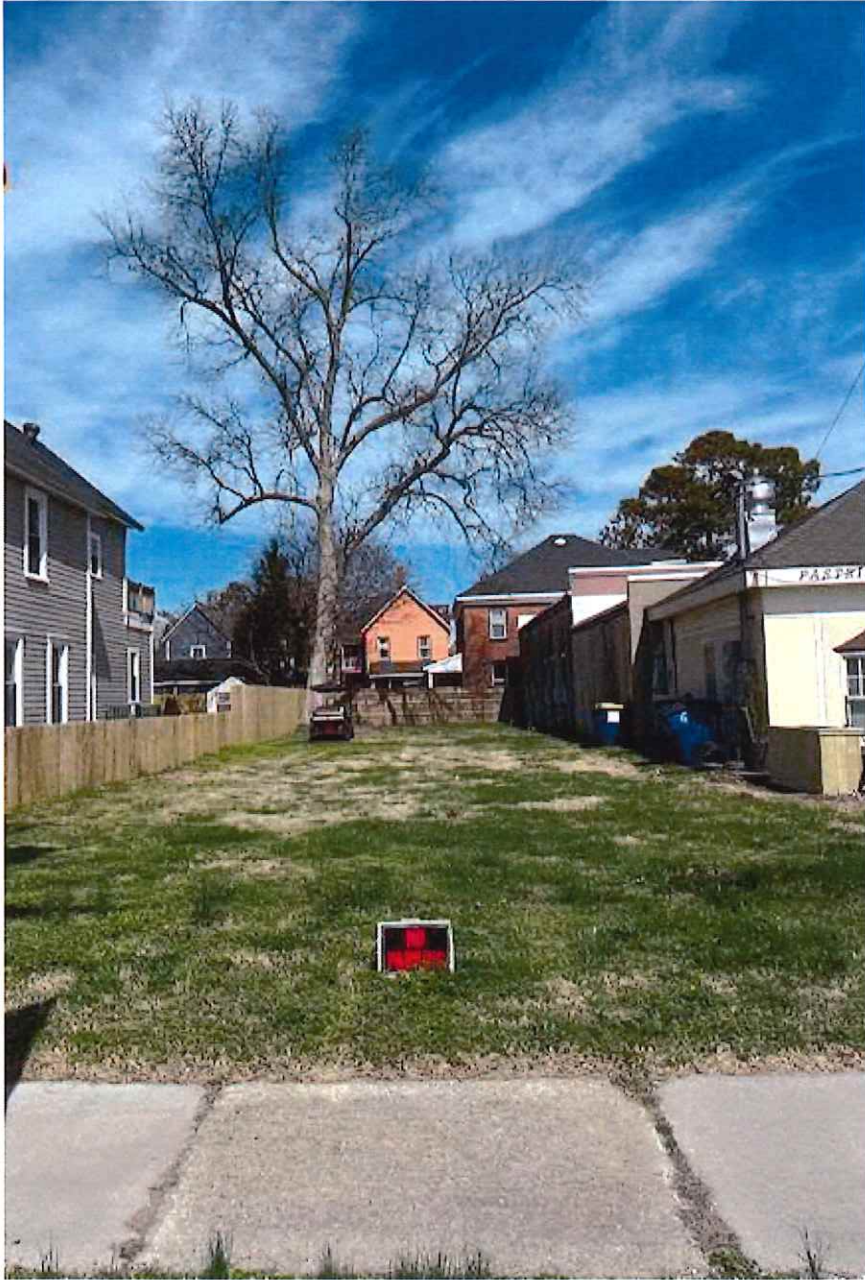
1208 W26th St
Norfolk, VA 23508

DRAWN BY: AH
CHECKED BY: QH
DATE: 03/10/26
SCALE: 1"=20'

FB: 012/50
JOB #26026
REVISED: N/A
SHEET 1 of 1









Municipal Corporation of Cape Charles

December 8th, 2025

Maureen Welch and Arnold Fuog
[REDACTED]

RE: Tree Permit Request

Dear Maureen Welch and Arnold Fuog,

On December 1st, 2025, you applied to remove 1 Tree located in the rear yard of Tax Map #83A3-1-563A, for the following reasons: (1) the tree appears to be diseased; (2) limbs overhang other properties in all directions, and (3) the trunk is entangling the trunk of a historic pecan tree. Due to these reasons, I have approved the removal of 1 Tree located on Tax Map #83A3-1-563A.

You have the right to appeal this decision by submitting an application to the Cape Charles Board of Zoning Appeals within 30 days of the date of this letter, as specified in Cape Charles Zoning Ordinance Section 2.6.4. The attached forms must be completed, and a filing fee of \$500 must be included. You will also be responsible for paying the actual advertising and mailing costs for notifications to neighboring property owners, which the Town will handle and send you a bill for.

ALL PAYMENTS are to be made out to the Town of Cape Charles.

Please contact our office if you have any questions.

Respectfully,

Katie Nunez
Director of Planning, Zoning Administrator & Subdivision Agent



HISTORIC DISTRICT REVIEW BOARD STAFF REPORT

Meeting Date: May 19, 2026

Item: Report from Zoning Administrator Katie Nunez

Prepared by: Director of Planning & Zoning Administrator

Date: May 11, 2026

-
- 1) **MINOR EXEMPTIONS APPROVED BY ZONING ADMINISTRATOR:**
 - a. 101 Madison Avenue – roof replacement, pursuant to CCTC Section 32-227 (2)
 - b. 522 Tazewell Avenue – replacing the rear deck, pursuant to CCTC Section 32-227 (7)

 - 2) **COMPLIANCE CHECKS BY ZONING COMPLIANCE OFFICER ON ISSUED CERTIFICATES OF APPROPRIATENESS (COA):** None.

 - 3) **NOTICES OF VIOLATIONS ISSUED ON BEHALF OF THE HDRB:** None.