



Meeting Date: March 11, 2026
Meeting Time: 7:00 P.M.
Meeting Location: City Hall
118 Hillsboro Ave.
Edwardsville, IL 62025

HISTORIC PRESERVATION COMMISSION AGENDA

Commission Members

Barb Stamer, Chair	Suzanne Oberholtzer
Lisa Schroeder, Vice Chair	Kent Weber
Mary Westerhold, Secretary	Christy Jennings
Joe Hutton	Kathryn Biarkis, Associate

1. Call to Order
2. Roll Call
3. Approval of Minutes
 - a. February 11, 2026
4. Citizens Wishing to Address the Commission
5. Certificates of Appropriateness
 - a. 834 Hale Avenue – Home Addition
6. Old Business
 - a. Grandview Subdivision
 - b. Grant project/Goshen Commons
 - c. HPC Guidelines
 - d. Project updates
 - e. Membership
 - f. Route 66 Festival
 - g. Landmark Application- Miriam McKinnie murals
 - h. ArchiRoom
7. New Business
8. Staff Approved COA Report
9. Financial Report
10. Correspondence

If prospective attendees require an interpreter or other access accommodation, please contact the Edwardsville City Clerk's office at 618-692-7500 no later than 48 hours prior to the commencement of the meeting to arrange the accommodations.

11. Committee Reports

12. Staff Updates Historic District and Landmark

- i. Stephenson House
- ii. Brick Streets
- iii. Downtown
- iv. Leclaire
- v. St. Louis Street

13. Adjournment

- a. Next meeting: **Wednesday, April 8, 2026**

If prospective attendees require an interpreter or other access accommodation, please contact the Edwardsville City Clerk's office at 618-692-7500 no later than 48 hours prior to the commencement of the meeting to arrange the accommodations.

HISTORIC PRESERVATION COMMISSION

February 11, 2026

7:00 PM

MINUTES

Approved: _____

Date: _____

The regularly scheduled meeting of the Historic Preservation Commission was held at 7:00 p.m. at City Hall located at 118 Hillsboro Avenue in Edwardsville, Illinois.

1. Call to Order

The meeting was called to order by Chair Barb Stamer at 7:02 PM

2. Roll Call

Members Present: Barb Stamer, Chair, Lisa Schroeder, Vice Chair, Mary Westerhold, Secretary, Joe Hutton, Suzanne Oberholtzer, Kent Weber, Christy Jennings, Kathryn Biarkis, Associate, Breana Buncher, City Planner, and Jack Vonderheide, Assistant City Planner.

3. Approval of minutes

Kent Weber motioned to approve the minutes of the January 14, 2026 meeting as presented. Joe Hutton seconded. Minutes approved.

4. Citizens Wishing to Address the Commission - None

5. Certificates of Appropriateness

- a. **246 North Main Street – Storefront Replacement – David Sirko, Edwardsville City Engineer** – Joe Hutton motioned to open for discussion and Lisa Schroeder seconded. After discussion, Joe Hutton motioned to approve with the following requests: entryway is angled at 30° and the wingwalls are glass; panels flanking doors have frames within them; bottom door panel is same height as flanking panels; full width glass transom above door; and large header above storefront should be picture framed. Lisa Schroeder seconded. Motion approved.
- b. **410 North Main Street – Sign – Salt & Smoke – Michael with Eberhart Signs** – Kent Weber motioned to open for discussion and Suzanne Oberholtzer seconded. After discussion, Kent Weber motioned to approve as presented, emphasizing that the sign should be anchored in mortar joints. Joe Hutton seconded. Motion approved.
- c. **600 Troy Road – Windows Replacement – Chad Morris, AAIC, Inc.** - Joe Hutton motioned to open for discussion and Lisa Schroeder seconded. After discussion, Joe Hutton motioned to approve as presented. Christy Jennings seconded. Motion approved.

- d. **122 North Main Street – Signs – Lashly & Baer – Niki McCormick, Lashly & Baer** - Suzanne Oberholtzer motioned to open for discussion and Kent Weber seconded. After discussion, Kent Weber motioned to approve as presented. Christy Jennings seconded. Motion approved.
- e. **1025 St. Louis Street – Window Replacement and Siding – Josh Young, Homeowner** - Lisa Schroeder motioned to open for discussion and Suzanne Oberholtzer seconded. After discussion, Christy Jennings motioned to approve as presented. Joe Hutton seconded. Motion approved.

6. Old Business

- a. **Grandview Subdivision**
- b. **Grant/Goshen Commons** – Joe Hutton reported that the request from HPC is part of the bid process.
- c. **HPC Guidelines** – Recent suggested revisions to the Solar Panel and Mural guidelines will be reviewed at the March meeting.
- d. **Project updates -**
- e. **Membership**
- f. **Route 66 Festival** - Brochures are in process
- g. **Landmark application- Miriam McKinnie murals** – All are insured; one has some condition issues.
- h. **ArchiRoom**

7. New Business

- a. **FY 2026-2027 Budget**
- b. **AT&T Booster Station National Register Recommendation** – Suzanne Oberholtzer and Joe Hutton will write a letter of recommendation for the application.

8. Staff Approved COA Report – None

9. Financial Report

10. Correspondence - None

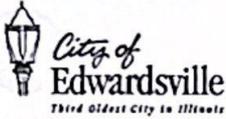
11. Committee Reports

12. Historic District and Landmark Updates

- i. **Stephenson House**
- ii. **Brick Streets**
- iii. **Downtown**
- iv. **Leclair**
- v. **St. Louis Street** – The positive article about Hadley House in the Edwardsville Intelligencer by Dr. Allen Duncan, Interim Superintendent, Edwardsville School District, was applauded by the commission.

Adjournment – Meeting adjourned at 9:27 PM.

Next meeting: **Wednesday, March 11, 2026**



Historic Preservation Commission Certificate of Appropriateness (COA) Approval Form

All work on properties designated as historic landmarks or that are located within a Historic District requires an approved Certificate of Appropriateness (COA). All COAs require review and approval by the Historic Preservation Commission (HPC). More information on the approval process, meeting dates, submittal deadlines, and the Design Guidelines may be found at: www.cityofedwardsville.com/HPC.

Applications may be submitted electronically (send to: hpc@cityofedwardsville.com) or in-person at the Department of Public Works, 200 E. Park Street, Edwardsville IL, during hours of operation.

The Historic Preservation Commission meets the second Wednesday of each month at 7:00 p.m. in City Hall (118 Hillsboro Ave). ALL APPLICANTS AND/OR CONTRACTORS **MUST** attend the Historic Preservation Meeting and present their project. Be prepared to describe the full project scope in detail.

For all projects, complete the information below. Supplemental information described below is required to be submitted with your application. If your project involves windows, doors, or siding, use the appropriate worksheet to provide additional details. Incomplete applications and lack of attendance at the meeting may result in your application being denied or held until the required information is provided.

- Site Plan** – required for additions, new construction, fences, patios, accessory structures, decks, retaining walls, porches, freestanding signs, etc.
- Detailed Drawing (including measurements and dimensions)** - required for signs, decks, porches (e.g. stairs, railings), and retaining walls. Drawings will be required to show both architectural elevations, as well as site design or layout. Photos of comparable projects are welcome, but are not a substitute for drawings.
- Elevation Drawings** – required for room additions, new construction (primary and accessory structure), chimneys, decks, stairs, porches, downspouts, retaining wall, signs
- Manufacturer Specifications/Cut Sheets** – required for windows, doors, screen/storm windows, screen/storm doors, solar panels, siding or other exterior finishes, exterior, garage doors, trim. Specifications must include details of materials, dimensions, and other physical properties. A price quote is not a substitution for specifications.
- Clear Photographs of the building and/or site** – required for all projects

Authorization Signature: _____

Approved Denied Date: _____

1. Property Information

Address of property: 834 Hale Ave Date of Application: 2/2/26

Is the property an Edwardsville Local Historic Landmark? Yes _____ No

Is the property located within a Historic District? Yes No _____

If Yes, Leclaire St. Louis Street _____ Downtown _____

2. Ownership Information

Owner's Name: Miriam Strotheide Owner's Phone: _____

Owner's Address: 834 Hale Ave city: Edwardsville State: IL Zip: 62025

Owner's Email Address: _____



3. Applicant Information (if different from Owner)

Applicant's Name: _____ Applicant's Phone _____

Applicant's Address: _____ City: _____ State: _____ Zip: _____

Applicant's Email Address: _____

4. Architect's Name (if applicable)

Architect's Name: Darlene Rutkowski-Hanks Architect's Phone 618-910-8290

Architect's Address: 12441 US Highway 40 PO Box 1418 City: Highland State: IL Zip: 62249

Architect's Email Address: darlene.hanks@korteco.com

5. Contractor's Name

Contractor's Name: Skyline Custom Homes Corp. Contractor's Phone 618-781-3831

Contractor's Address: 135 Kingsdrake Blvd. City: Glen Carbon State: IL Zip: 62034

Contractor's Email Address: customhomes.skyline@gmail.com

6. Project Information

Provide a detailed written description of your project. (attach additional sheets and supplemental information as needed)

add a room addition on the Back of The house and
The Shingles will Match what is on the
existing house. The roof is 2 yrs old
will match Existing Facis, Door Frame openings and
Window openings in The house

Standards of Review (Sec. 54-5). In considering your application, the Commission shall consider the following general standards, in addition to specific Design Guidelines.

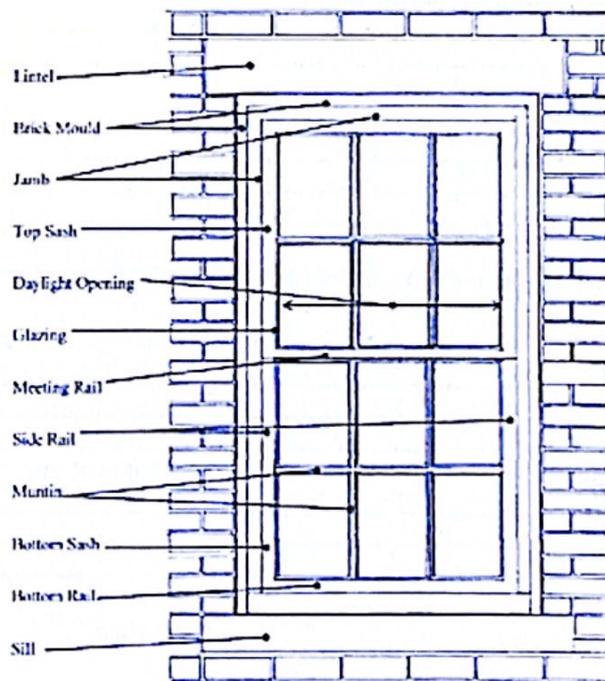
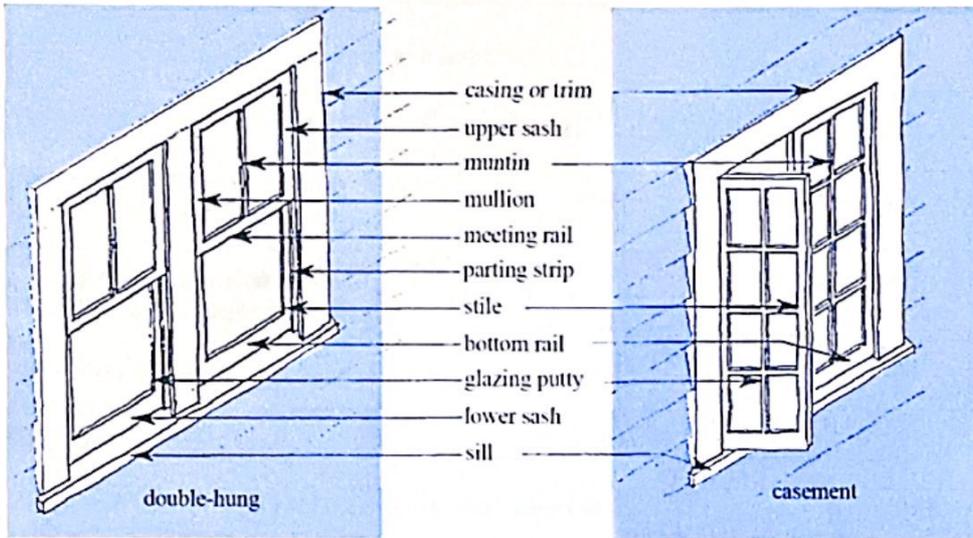
1. **Height –** Height shall be visually compatible with properties, structure, sites, public ways, objects, and places to which it is visibly related.
2. **Proportion to front façade –** The relationship of the width to height of the front elevation shall be visually compatible with properties, structures, sites, public ways, objects, and places to which the building is visually related.
3. **Proportion of openings –** The relationship of the width to height of windows and doors shall be visually compatible with properties, structures, sites, public ways, objects, and places to which the building is visually related.
4. **Rhythm of solids to voids in front facades –** The relationship of solids to voids in the front façade of a structure shall be visually compatible with properties, structures, sites, public ways, objects, and places to which it is visually related.
5. **Rhythm of spacing and structures on streets –** The relationship of a structure or objects to the open space between it and adjoining structures or objects shall be visually compatible with the properties, structures, sites, public ways, objects, and places to which it is visually related.
6. **Rhythm of entrance porches, storefront recesses and other projections –** The relationship of entrances and other projections to sidewalks shall be visually compatible with the properties, structures, sites, public ways, objects, and places to which it is visually related.
7. **Relationship of materials and texture –** The relationship of the materials and texture of the façade shall be visually compatible with the predominant materials used in the structures to which it is visually related.
8. **Roof Shapes –** The roof shape of a structure shall be visually compatible with the structures to which it is visually related
9. **Walls of Continuity –** Facades and property and site structures, such as masonry walls, fences, and landscape masses, shall, when it is characteristic of the area, form cohesive walls of enclosure along a street, to ensure visual compatibility with the properties, structures, sites, public ways, objects, and places to which such elements are visually related.
10. **Scale of a Structure –** The size and mass of structures in relation to open spaces, windows, door openings, porches, adjacent structures, and balconies, shall be visually compatible with the properties, structures, sites, public ways, objects, and places to which they are visually related.
11. **Directional expression of a front elevation –** A structure shall be visibly compatible with the properties, structures, site, public ways, objects, and places to which it is visually related in its directional character, whether this be vertical character, horizontal character, or non-directional character.
12. **The distinguishing original qualities or character of a property, structure, site or object and its environment shall not be destroyed.** The alteration of any historic material or distinctive architectural features should be avoided when possible.
13. **Preservation of natural resources –** Every reasonable effort shall be made to protect and preserve archaeological and natural resources affected by, or adjacent to any project.
14. **Compatibility –** In considering new construction, the commission shall not impose a requirement for the use of a single architectural style or period, though it may impose a requirement for compatibility.

Window and Door Worksheet



Did you know: Windows are responsible for only minor energy loss. Only 10-12% of the total air infiltration is through windows the cold air is actually transferred through the roof, walls, and the sill. Instead of replacing historic windows, properly repaired windows can be just as energy efficient, while saving money and preserving historic detail.

Use the diagrams below to aid in your description of your existing and proposed windows. Provide as many details as possible.



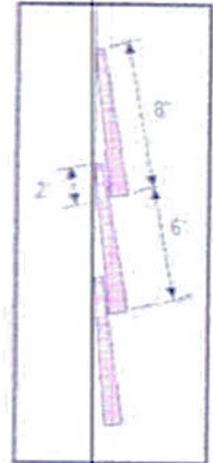
WINDOW EXTERIOR

Siding Worksheet

Complete the following table describing EXISTING and PROPOSED SIDING.

1. What material is your current siding made of? Vinyl Double 4"
2. Is this the original siding materials? Yes No Unsure
 If no, describe the original siding material and remove a small section to uncover the condition of the original siding material. Photos of the original siding materials must be provided.
Asbestos siding
3. If your siding is wood, do you intend to scrape and re-paint? Yes No N/A
4. What material will your new siding be made of? Vinyl Double 4" .046
 - a. If you intend to install vinyl siding, please list thickness: .046
 - b. What type of lap will your new siding have? Double 4"
5. What is the exposure* of the existing siding? 4"
6. What is the exposure of the proposed siding? 4"
7. Will the proposed siding have any texture? Yes No
 If yes, please describe (e.g. wood grain texture).
Wood Grain
8. Describe existing trim used around windows, doors, and corners (include material and dimensions).
Alum. Wrap 1x4
9. Describe proposed trim to be used around windows, doors, and corners (include material and dimensions).
Alum. wrap 1x4s"
10. Are there any portions of the house that have an accent siding material (e.g. fish scales on an eave on the front of the house)? Yes No
 If yes, please describe and provide photos.
 If yes, describe how you propose to accent the same spaces with new siding.

*The exposure of the siding shown in the image is 6".



WINDOOR UNLIMITED INC
 200 B COLLINSVILLE ROAD
 Troy, IL 62294
 PH: 618-505-7502

ORDER: 807465
 ORDER DATE: 1/29/2026
 ORDER CONTACT:

QUOTE

INVOICE INFORMATION

Windgate

SHIPPING INFORMATION

Windgate

SHIP VIA:

ORDER	ORDER DATE	PO NUMBER	CUSTOMER REF	TERMS										
807465	1/29/2026													
ITEM	DESCRIPTION	QTY	SIZE	PRICE	TOTAL									
1	Windgate Single Hung Built-In "J" Nail Fin Rough Opening Interior Color{White} Exterior Color{White} Glazing{Dual Glaze - Double Strength} Glass IG{Loe270/Clear IG} Half Screen Fiberglass Double Locks	2	RO: 36 W x 63 H TTT: 35 1/2 W x 62 1/2 H											
<table border="1" style="margin-left: auto; border-collapse: collapse;"> <tr> <th>U-Value</th> <th>Solar Heat Gain</th> <th>Visible Light</th> </tr> <tr> <td style="text-align: center;">0.27</td> <td style="text-align: center;">0.29</td> <td style="text-align: center;">0.55</td> </tr> <tr> <td>Energy Star Zones</td> <td colspan="2" style="text-align: center;">N/A</td> </tr> </table>						U-Value	Solar Heat Gain	Visible Light	0.27	0.29	0.55	Energy Star Zones	N/A	
U-Value	Solar Heat Gain	Visible Light												
0.27	0.29	0.55												
Energy Star Zones	N/A													
TOTALS: 2				SUBTOTAL:	\$613.54									
				TAX 1 7.85%:	\$48.16									
				TOTAL:	\$661.70									

COMMENT:

Complete the following table describing PROPOSED WINDOWS and/or DOORS.

Window I.D.**	Window Type (check more than one if appropriate)	Window Material	Exterior Window Sill Depth	Number of Divided Lights	Divided Light Grid Description	Window Location	Glass color and/or coating	Exterior trim and dimension
EXAMPLE A.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	Andersen Fiberx (white)	4"	9 over 1	Top window divided in thirds, grids on exterior of window	All windows on first floor	Low-e	4" trim on all sides
A.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	Vynul	6"	0	No Grids	First floor	yes	Same as front Existing House
B.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	Vynul	6"	0	No Grid	First Floor	yes	Same as front
C.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider							

** Provide technical specifications for all proposed windows (a sales brochure or price quote will not suffice)

Complete the following table describing EXISTING WINDOWS and/or DOORS. Please refer to diagram on pages 2 and 3.

Window I.D.*	Window Type (check more than one if appropriate)	Window Material (sash, sill, jamb, etc.)	Exterior Window Sill Depth	Number of panes (divided lights)	Divided Light Grid Description	Window Location	Glass color and/or coating	Exterior frame and dimension
EXAMPLE A.	<input type="checkbox"/> Casement <input checked="" type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	wood	4"	9 over 1	Top window divided in thirds	All windows on first floor	Clear	4" wide frame on all sides of window
A.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	Vynl	4"	1 over 1		All windows on the first floor	Clear	4" wide around the window
B.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input checked="" type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider	Vynl	4"	1 over 1		on the second floor	Clear	The Same
C.	<input type="checkbox"/> Casement <input type="checkbox"/> Divided Light <input type="checkbox"/> Double Hung <input type="checkbox"/> Fixed <input type="checkbox"/> Single Hung <input type="checkbox"/> Slider							

*Provide photos of windows with associated I.D.

Do any of your windows or doors have storm windows or storm doors? If so, please describe: Storm Door on The front Door
No Storm Windows

Siding and Exterior Features Policy
(p. 10 Residential Design Guidelines)

1. Whenever possible, reserve all significant historic architectural features of the exterior including siding, bays, balustrades, cornices, etc. Preserve all trim features, such as, friezes brackets, railings, surrounds, drip caps, etc.
2. Do not sandblast siding, trim, soffits and soft brick.
3. Do not high-pressure water blast siding, trim, soffits, and soft brick.
4. Where synthetic siding, trim, and/or soffits exist, it is recommended to remove it and repair the original historic siding under it, unless it is technical infeasible to do so.
5. Deteriorated siding materials original to the dwelling should be repaired or replaced with materials similar to those used in the original construction.
6. Substitute materials should be used only in instances where the original materials are not technically feasible.
7. No new trim or moldings may be added to historic exterior surfaces unless it can be shown that such trim would have been historically used for that type of building.
8. HPC does NOT ALLOW the following types of non-traditional siding materials:
 - a. Artificial stone
 - b. Artificial brick veneer
 - c. Asbestos or asphalt shingles
 - d. Aluminum
 - e. Vinyl – Dutch lap style
9. HPC DOES ALLOW cement fiberboard and vinyl siding, however, HPC recommends the use of cement fiberboard rather than vinyl siding whenever possible. Minimum vinyl thickness is 0.044”.



REScheck-Web™

Compliance Certificate

Project Information

Project Title: 834 Hale Ave (Strotheide Residence)
Energy Code: 2024 Illinois Energy Conservation Code
Location: Edwardsville, Illinois
Construction Type: Single Family
Project Type: Addition
Project Sub Type: None
Orientation: Bldg. faces 270 deg. from North
Glazing Area: 8%
Climate Zone: 4a (5214 HDD)
Project No: 1821330
All Electric: false
Is Renewable: false
Has Battery: false
Has Charger: false
Has Heat Pump: false

Construction Site:

Owner/Agent:

Designer/Contractor:

Project Notes:

Energy Credits

Description	Credits
R408.2.2(4): High Performance Gas furnace (Option 1)	5.0
R408.2.2(2): High Performance Cooling (Option 1)	2.0
R408.2.4(2) 100% of duct systems in conditioned space	6.0

Required: 5 Proposed: 13

Envelope Assemblies

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Prop. U-Factor/ F-Factor	Req. U-Factor/ F-Factor	Prop. UA	Req. UA
Ceiling: Flat Ceiling or Scissor Truss	501	13.0	37.0	0.019	0.026	10	13
Right plus rim: Wood Frame, 16" o.c. Orientation: Right side	162	19.0	3.0	0.050	0.045	8	7
Left plus rim: Wood Frame, 16" o.c. Orientation: Left side	162	19.0	3.0	0.050	0.045	7	6
Door: Solid Door (under 50% glazing) Orientation: Left side	20			0.300	0.300	6	6
Back plus rim: Wood Frame, 16" o.c. Orientation: Left side	252	19.0	3.0	0.050	0.045	11	10
Window: Vinyl Frame SHGC: 0.3 Orientation: Left side	30			0.300	0.300	9	9
Front: Solid Concrete or Masonry Orientation: Front Wall height: 8.00' Insulation depth: 8.00' Insulation position: Integral Insulation	224	13.0	0.0	0.059	0.059	13	13
Back: Solid Concrete or Masonry Orientation: Back Wall height: 8.00' Insulation depth: 8.00' Insulation position: Integral Insulation	224	13.0	0.0	0.059	0.059	12	12
Window: Vinyl Frame SHGC: 0.3 Orientation: Back	18			0.300	0.300	5	5
Right: Solid Concrete or Masonry Orientation: Right side Wall height: 8.00' Insulation depth: 8.00' Insulation position: Integral Insulation	144	13.0	0.0	0.059	0.059	8	8
Left: Solid Concrete or Masonry Orientation: Left side Wall height: 8.00' Insulation depth: 8.00' Insulation position: Integral Insulation	144	13.0	0.0	0.059	0.059	8	8

Compliance: Passes using TC trade-off

Compliance: 0.0% Better Than Code

Max UA: 97

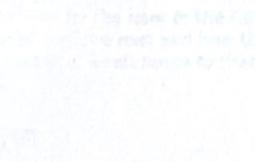
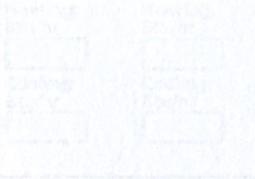
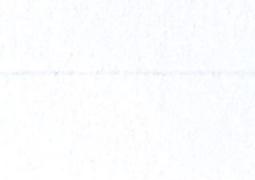
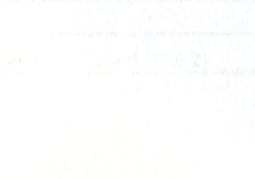
Your UA: 97

The % Better or Worse Than Code Index reflects how close to compliance the house is based on code trade-off rules. It DOES NOT provide an estimate of energy use or cost relative to a minimum-code home.

Slab-on-grade tradeoffs are no longer considered in the UA or performance compliance path in REScheck. Each slab-on-grade assembly in the specified climate zone must meet the minimum energy code insulation R-value and depth requirements.

Compliance Statement

The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the 2024 Illinois Energy Conservation Code requirements in REScheck-Web and to comply with the mandatory requirements listed in the REScheck Inspection Checklist.

Name - Title	Signature	Date
<p>Project Engineer</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>
<p>Inspector</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>
<p>Inspector</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>
<p>Inspector</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>
<p>Inspector</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>
<p>Inspector</p> <p>834 Hale Ave (Strotheide Residence)</p>		<p>2/2/26</p>



Inspection Checklist

Energy Code: 2024 Illinois Energy Conservation Code

Requirements: 0% were addressed directly in the REScheck software

Text in the "Comments/Assumptions" column is provided by the user in the REScheck Requirements screen. For each requirement, the user certifies that a code requirement will be met and how that is documented, or that an exception is being claimed. Where compliance is itemized in a separate table, a reference to that table is provided.

Pre-Inspection/Plan Review

Section # & Req.ID	Pre-Inspection/Plan Review	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
105.1, 105.2 [PR1] ¹	Construction drawings and documentation demonstrate energy code compliance for the building envelope. Thermal envelope and energy compliance path represented on construction documents.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
105.1, 105.2, 403.8 [PR3] ¹	Construction drawings and documentation demonstrate energy code compliance for lighting and mechanical systems. Systems serving multiple dwelling units must demonstrate compliance with the IECC Commercial Provisions.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
302.1, 403.7 [PR2] ¹	Heating and cooling equipment is sized per ACCA Manual S based on loads calculated per ACCA Manual J or other methods approved by the code official.	Heating: Btu/hr <input type="text"/> Cooling: Btu/hr <input type="text"/>	Heating: Btu/hr <input type="text"/> Cooling: Btu/hr <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	

Additional Comments/Assumptions:

1	High Impact (Tier 1)	2	Medium Impact (Tier 2)	3	Low Impact (Tier 3)
---	----------------------	---	------------------------	---	---------------------

Foundation Inspection

Section # & Req.ID	Foundation Inspection	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
303.2 [FO5] ¹	Conditioned basement wall insulation installed per manufacturer's instructions.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.8 [FI91] ²	Systems serving multiple dwelling units comply with Sections C403 and C404 of the commercial code.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.9.1 [FI92] ²	Heating systems installed for outdoor heating are radiant systems controlled by occupancy sensing or timer switch.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.9.2, 403.9.3, 403.9.4 [FI92] ²	Snow and ice-melting system controls installed to shut off system when pavement temperature > 50F and no precipitation or automatic controls to shut off the system when outdoor temperature > 40F.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
303.2.1 [FO11] ²	A protective covering is installed to protect exposed exterior insulation and extends a minimum of 6 in. below grade.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.1.2 [FO4] ¹	Conditioned basement wall insulation R-value. Where interior insulation is used, verification may need to occur during Insulation Inspection. Not required in warm-humid locations in Climate Zone 3.	R- <input type="text"/> R- <input type="text"/>	R- <input type="text"/> R- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	See the Envelope Assemblies table for values
402.2.9 [FO6] ¹	Conditioned basement wall insulated in accordance with Table R402.1.3 with insulation depth the minimum of 10 ft below grade or to the basement floor.	<input type="text"/> ft	<input type="text"/> ft	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	See the Envelope Assemblies table for values

Additional Comments/Assumptions:

1	High Impact (Tier 1)	2	Medium Impact (Tier 2)	3	Low Impact (Tier 3)
---	----------------------	---	------------------------	---	---------------------

Framing / Rough-In Inspection

Section # & Req.ID	Framing / Rough-In Inspection	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
303.1.3 [FR4] ¹	U-factors of fenestration products are determined in accordance with the NFRC test procedure or taken from the default table.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.5.1.1 [FR23] ¹	Air barrier and thermal barrier installed per manufacturer's instructions.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.5.3 [FR20] ¹	Fenestration that is not site built is listed and labeled as meeting AAMA /WDMA/CSA 101/I.S.2/A440 or has infiltration rates per NFRC 400 that do not exceed code limits.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.5.4 [FR16] ²	IC-rated recessed lighting fixtures sealed at housing/interior finish and labeled to indicate ≤ 2.0 cfm leakage at 75 Pa.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.4 [FR17] ²	HVAC piping conveying fluids above 105 °F or chilled fluids below 55 °F are insulated to $\geq R-3$.	R- <input type="text"/>	R- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.6 [FR19] ²	Automatic or gravity dampers are installed on all outdoor air intakes and exhausts for mechanical ventilation systems.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.6.1 [FR30] ²	Ventilation systems in climate zones 6, 7 & 8 shall utilize heat or energy recovery with balanced ventilation and a sensible recovery efficiency (SRE) $\geq 65\%$ at 32 F.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.3.3 [FR12] ¹	Supply and return ducts in attics insulated $\geq R-8$ where duct is ≥ 3 inches in diameter and $\geq R-6$ where < 3 inches.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	

Section # & Req.ID	Framing / Rough-In Inspection	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
403.3.6 [FR13] ¹	Ducts, air handlers and filter boxes are sealed with joints/seams compliant with International Mechanical Code or International Residential Code, as applicable.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.4.1 [FR24] ¹	Protection of insulation on HVAC piping.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.5.2 [FR18] ²	Hot water pipes are insulated to ≥ 1 inch of insulation.	R- <input type="text"/>	R- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.5.5 [FR29] ²	Air-sealed electrical and communication boxes installed in the thermal boundary of the envelope sealed to limit air leakage between conditioned and unconditioned spaces.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.3.1 [FR12] ¹	Duct systems are design and sized in accordance with ACCA Manual D. Duct systems serving multiple dwelling units is sized in accordance with ASHRAE Handbook of Fundamentals, ACCA Manual D or an equivalent methodology.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.1, 402.4.4 [FR1] ¹	Door U-factor.	U- <input type="text"/>	U- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	<i>See the Envelope Assemblies table for values</i>
402.1, 402.4.1, 402.4.3, 402.6 [FR2] ¹	Glazing U-factor (area-weighted average).	U- <input type="text"/>	U- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	<i>See the Envelope Assemblies table for values</i>

Additional Comments/Assumptions:

1	High Impact (Tier 1)	2	Medium Impact (Tier 2)	3	Low Impact (Tier 3)
---	----------------------	---	------------------------	---	---------------------

Insulation Inspection

Section # & Req.ID	Insulation Inspection	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
303.1 [IN13] ²	All installed insulation is labeled or the installed R-values provided.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
303.2 [IN4] ¹	Wall insulation is installed per manufacturer's instructions.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.1, 402.2.6, 402.2.7 [IN3] ¹	Wall insulation R-value. If this is a mass wall with at least 1/2 of the wall insulation on the wall exterior, the exterior insulation requirement applies (FR10).	R: <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Mass <input type="checkbox"/> Steel	R: <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Mass <input type="checkbox"/> Steel	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	See the Envelope Assemblies table for values

Additional Comments/Assumptions:

1	High Impact (Tier 1)	2	Medium Impact (Tier 2)	3	Low Impact (Tier 3)
---	----------------------	---	------------------------	---	---------------------

Final Inspection Provisions

Section # & Req.ID	Final Inspection Provisions	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
303.1.1.1, 303.2 [F12] ¹	Ceiling insulation installed per manufacturer's instructions. Blown insulation marked every 300 ft ² .			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
303.3 [F18] ³	Manufacturer manuals for mechanical and water heating systems have been provided.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.2 [F126] ²	Hot water boilers have automatic outdoor setback control to lower boiler water temperature based on outdoor temperature, indoor temperature or water temperature sensing.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.3.6.1 [F124] ¹	Air handler leakage designated by manufacturer at <=2% of design air flow.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.3.7 [F127] ¹	Ducts are pressure tested in accordance with ANE1/RESNET/ICC 380 or ASTM E1554 to determine air leakage with either: Rough-in test: Total leakage measured with a pressure differential of 0.1 inch w.g. across the system including the manufacturer's air handler enclosure if installed at time of test. Postconstruction test: Total leakage measured with a pressure differential of 0.1 inch w.g. across the entire system including the manufacturer's air handler enclosure.	<input type="text"/> cfm/100 ft ²	<input type="text"/> cfm/100 ft ²	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.3.8 [F14] ¹	Duct tightness test result of <=4 cfm/100 ft ² across the system or <=3 cfm/100 ft ² without air handler @ 25 Pa. Duct tightness <= 8 cfm/100 ft ² for ducts within thermal envelope. For rough-in tests, verification may need to occur during Framing Inspection.	<input type="text"/> cfm/100 ft ²	<input type="text"/> cfm/100 ft ²	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.5.1 [F11] ²	Circulating service hot water systems have automatic or accessible manual controls.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.5.1.1.1 [F132] ²	Demand recirculation water systems have automatic controls to start pump when hot water is requested.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	

Section # & Req.ID	Final Inspection Provisions	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
403.5.1.1 [F128] ²	Heated water circulation systems have a circulation pump. The system return pipe is a dedicated return pipe or a cold water supply pipe. Gravity and thermos-syphon circulation systems are not present. Controls for circulating hot water system pumps start the pump with signal for hot water demand within the occupancy. Controls automatically turn off the pump when water in circulation loop is at set-point temperature and no demand for hot water exists.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.5.1.2 [F129] ²	Electric heat trace systems comply with IEEE 515.1 or UL 515. Controls automatically adjust the energy input to the heat tracing to maintain the desired water temperature in the piping.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.5.3 [F131] ²	Drain water heat recovery units tested in accordance with CSA B55.1. Potable water-side pressure loss of drain water heat recovery units < 3 psi for individual units connected to one or two showers. Potable water-side pressure loss of drain water heat recovery units < 2 psi for individual units connected to three or more showers.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
401.3 [F17] ²	Compliance certificate posted with building specifications, compliance path, R408 energy credits, results and solar ready zone if provided.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.6.2 [F125] ²	403.6.2: All mechanical ventilation system fans meet efficacy and air flow limits per Table R403.6.2.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.6.3 [F133] ²	Mechanical ventilation systems tested and verified to meet the minimum flow rates required by Section R403.6.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
403.6.5 [F134] ²	Intermittent exhaust for bathrooms/toilet rooms has automatic control, occupant sensor control, humidity control or contaminant control.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.1, 402.2.1, 402.2.2, 402.2.7 [F11] ¹	Ceiling insulation R-value.	R- <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Steel	R- <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	See the Envelope Assemblies table for values

Section # & Req.ID	Final Inspection Provisions	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
403.13, 403.13.1 [F135] ³	Gas fireplaces equipped with on-demand pilot, intermittent ignition or interrupted ignition. Fireplace efficiency > 50% in accordance with CSA P.4.1			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.1 [F16] ¹	100% of permanent fixtures have high efficacy lamps.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.1.2 [F135] ³	Exterior lighting power is below the allowable wattage in Table R404.1.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.1.5 [F123] ³	Fuel gas lighting systems have no continuous pilot light.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.2.1, 404.2.2 [F136] ³	Permanent interior lighting shall be controlled with either a manual dimmer, occupancy sensor or auto shut off control based on occupancy built with manual override.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.3 [F137] ³	Exterior lighting ≥ 30 watts shall have the following controls: manual on/off switch with automatic shut-off, automatic shut-off in daylight hours, and controls that override automatic shutoff that returns to automatic control within 24 hours.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
404.4 [F136] ³	Where renewable energy generation equipment is installed, renewable energy credits (RECs) or energy attributable certificates (EACs) associated with the renewable energy used for compliance are provided to the code official.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.2.4 [F122] ²	Vented attics with air permeable insulation include baffle adjacent to soffit and eave vents that extends over insulation.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.2.5 [F13] ¹	Attic access hatch and door insulation $\geq R$ -value of the adjacent assembly.	R- <input type="text"/>	R- <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	

Section # & Req.ID	Final Inspection Provisions	Plans Verified Value	Field Verified Value	Complies?	Comments/Assumptions
402.5.1.3 [FI17] ¹	Blower door test @ 50 Pa. <=4.0 ACH50 in Climate Zones 1-2, <=3.0 ACH50 in Climate Zones 3-5 and <= 2.5 ACH50 in Climate Zones 6-8.	ACH 50 = <input type="text"/>	ACH 50 = <input type="text"/>	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	
402.3 [FI43] ²	Radiant barriers are installed in accordance with ASTM C1743	R- <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Steel	R- <input type="text"/> <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	See the Envelope Assemblies table for values
403.1.1 [FI9] ²	Programmable thermostats installed for control of primary heating and cooling systems and initially set by manufacturer to code specifications.			<input type="checkbox"/> Complies <input type="checkbox"/> Does Not Comply <input type="checkbox"/> Not Observable <input type="checkbox"/> Not Applicable	

Additional Comments/Assumptions:

1	High Impact (Tier 1)	2	Medium Impact (Tier 2)	3	Low Impact (Tier 3)
---	----------------------	---	------------------------	---	---------------------



2024 Illinois Energy Conservation Code Energy Efficiency Certificate

Insulation Rating	R-Value
Above-Grade Wall	22.00
Below-Grade Wall	13.00
Floor	0.00
Ceiling / Roof	50.00
Ductwork (unconditioned spaces):	—

Glass & Door Rating	U-Factor	SHGC
Window	0.30	0.30
Door	0.30	
Skylight	0.00	

Heating & Cooling Equipment	Efficiency
Heating System: _____	_____
Cooling System: _____	_____
Water Heater: _____	_____

Signature

Name: _____ Date: _____

Comments:

Materials

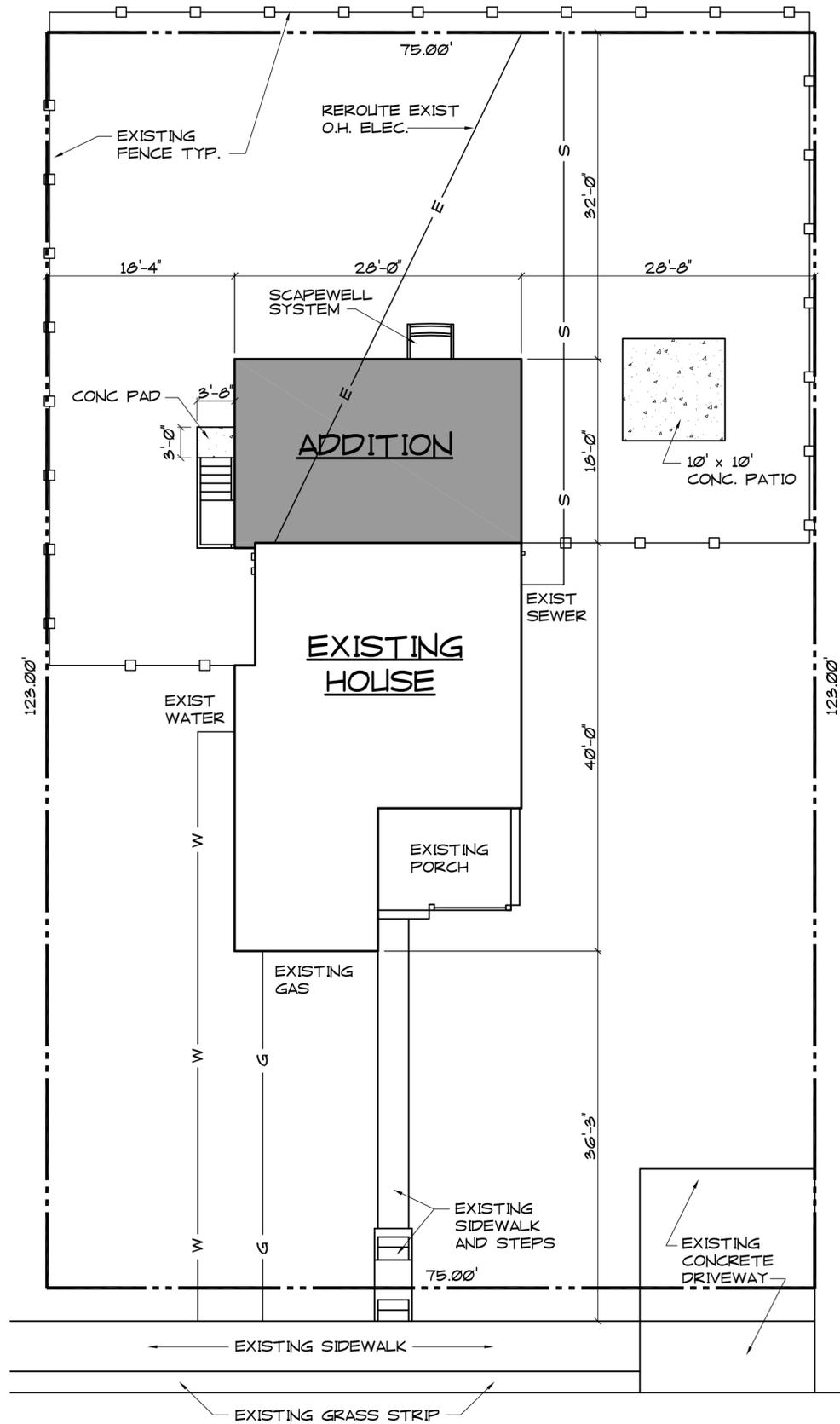
PO#: MO221625-1

Supplier: ABC Supply

Estimated Delivery Date: To Be Determined

Status: Ordered

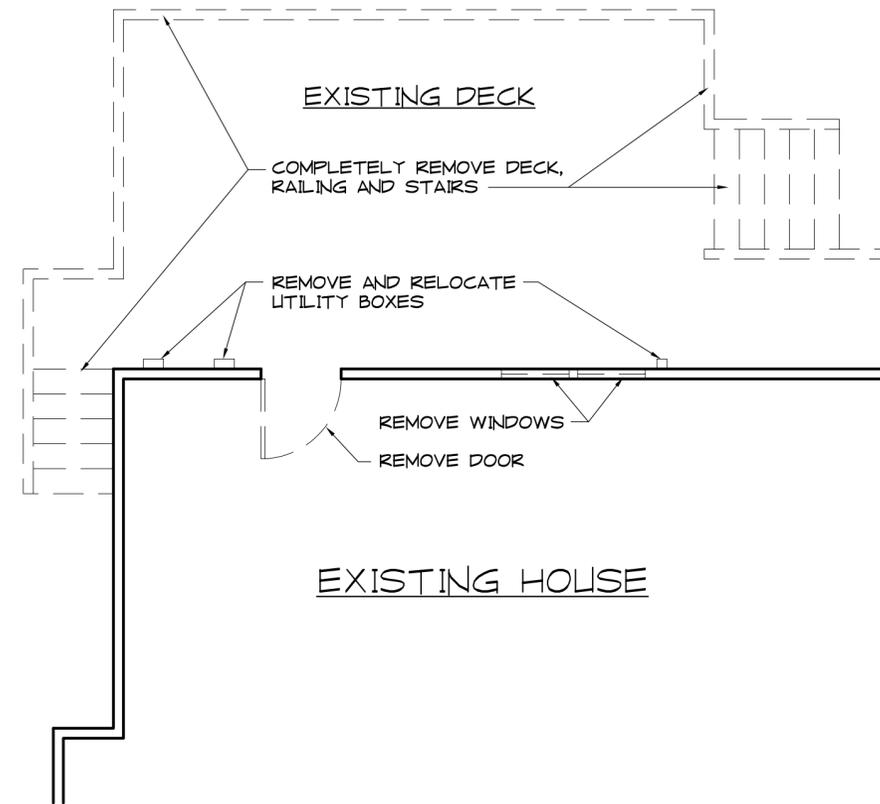
#	Item	Color	Size	Qty	Unit
1	CertainTeed Landmark Shingles	Driftwood		19.00	SQ
2	Starter Shingles		CertainTeed SwiftStart	3.00	BD
3	CertainTeed Hip & Ridge Cap	Driftwood		7.00	BD
4	Ice & Water Shield		CertainTeed Winterguard, 2SQ Roll	2.00	RL
5	Synthetic Felt		CertainTeed RoofRunner	4.00	RL
6	Drip Edge - 1.85", (10')	Black		16.00	EA
7	Step Flashing - 4"x4"x8"	Black		1.00	BD
8	Roof-to-Wall Flashing, (10')	Black		4.00	EA
9	Staples, Stainless Steel - 3/8"			3.00	BX
10	Nails, Roofing Coil Nails - 1 1/4"			3.00	BX
11	Ridge Vent		CertainTeed, 28"	2.00	EA
12	OSB - 7/16", (4'x8')			2.00	EA
13	Aluminum Chimney Flashing	Black		1.00	EA
14	2 x 6 x 12 - CLOSING SKYLIGHTS			3.00	EA
15	Vulkern 116 Sealant	Black		2.00	EA
16	Touch Up Paint	Black		2.00	EA



SITE PLAN

SCALE: 1" = 10'-0"

HALE AVE



DEMOLITION FLOOR PLAN

SCALE: 1/4" = 1'-0"

GENERAL NOTES :

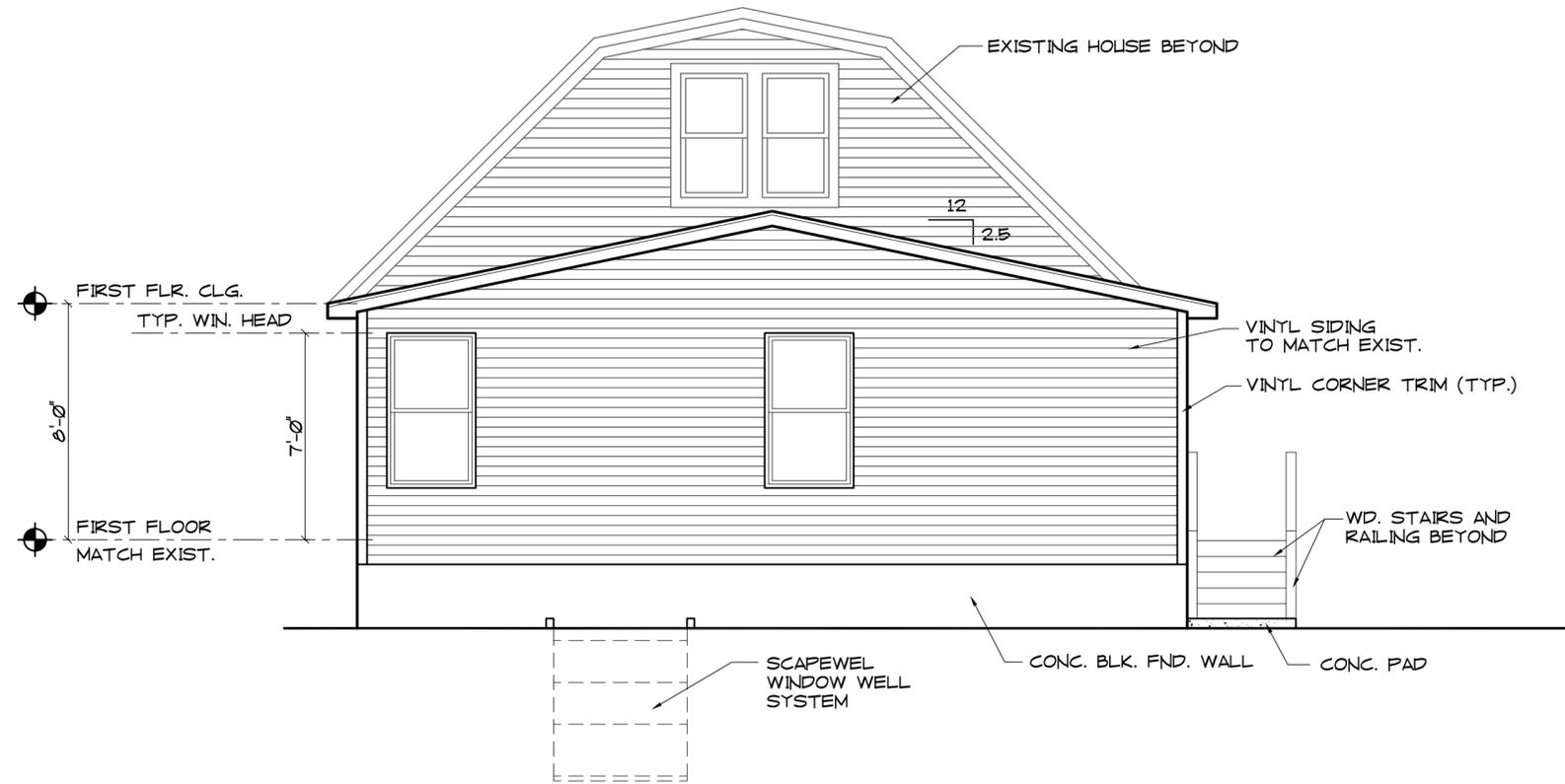
1. DO NOT SCALE DRAWINGS FOR ACTUAL CONSTRUCTION PURPOSES.
2. WINDOW DESIGNATIONS ARE GIVEN IN FEET AND INCHES (EX. 3050 = 3'-0" WIDE x 5'-0" HIGH). WINDOW MANUF. TO VERIFY THEIR UNIT SIZE TO MEET EMERGENCY EGRESS REQUIREMENTS.
3. CONTRACTOR IS RESPONSIBLE FOR MEETING ALL BUILDING CODES, STRUCTURAL REQUIREMENTS AND PROVIDING PROPER VENTILATION.
4. OWNER AND/OR CONTRACTOR IS RESPONSIBLE FOR MEETING ANY AND ALL SUBDIVISION BUILDING RESTRICTIONS.
5. ALL FOOTINGS AND FOUNDATIONS TO BE PLACED ON SOLID VIRGIN SOIL OR ENGINEERED COMPACTED FILL.

A NEW ADDITION FOR:
COLTEN & MIRIAH STROTHEIDE

LOCATION: 834 HALE AVE., EDWARDSVILLE, IL		
DATE: 1/27/2026	DRAWN BY: ACARD - D.R.H.	PROJECT NO. 26-01

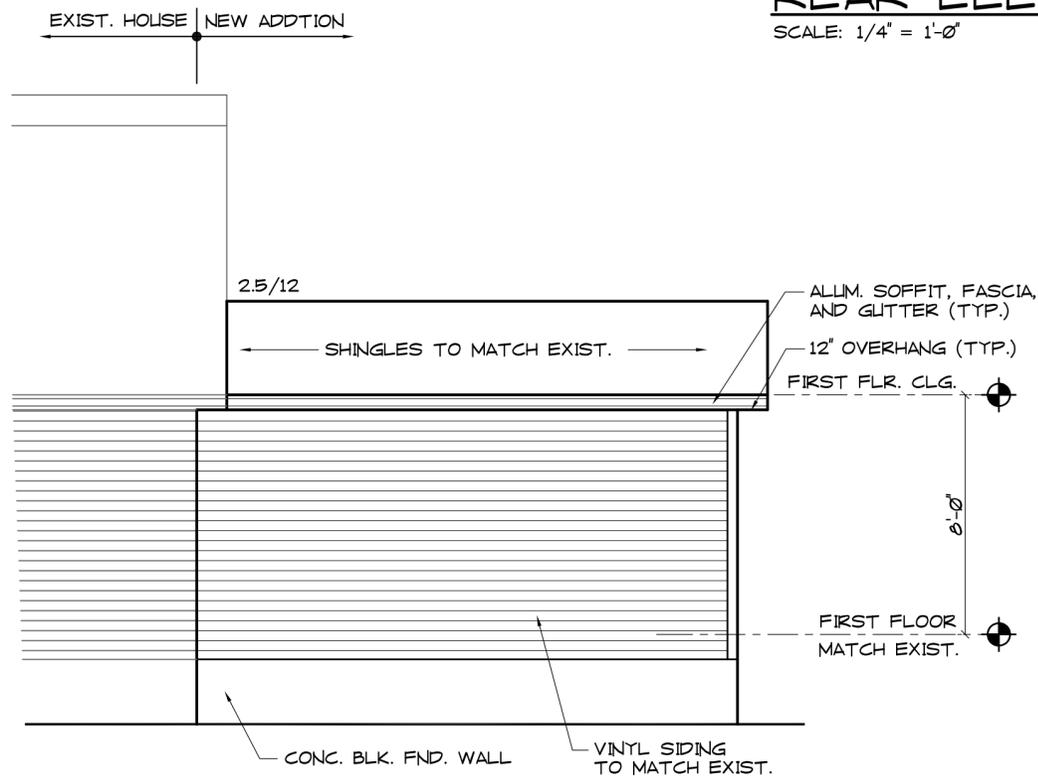
ADVANCED CONSTRUCTION AND RESIDENTIAL DESIGN / DARLENE RUTKOWSKI-HANKS ASSUMES NO LIABILITY FOR ANY HOME CONSTRUCTED FROM THIS PLAN AND SHALL BE HELD HARMLESS FOR ANY CLAIMS ARISING PRIOR TO, DURING OR AFTER ANY CONSTRUCTION. THE PURCHASER OF THIS PLAN SHALL VERIFY ALL DIMENSIONS AND COMPLIANCE WITH ALL LOCAL BUILDING CODES AND ORDINANCES PRIOR TO CONSTRUCTION.

ACARD
Advanced Construction
And
Residential Design
(618) 910-8290



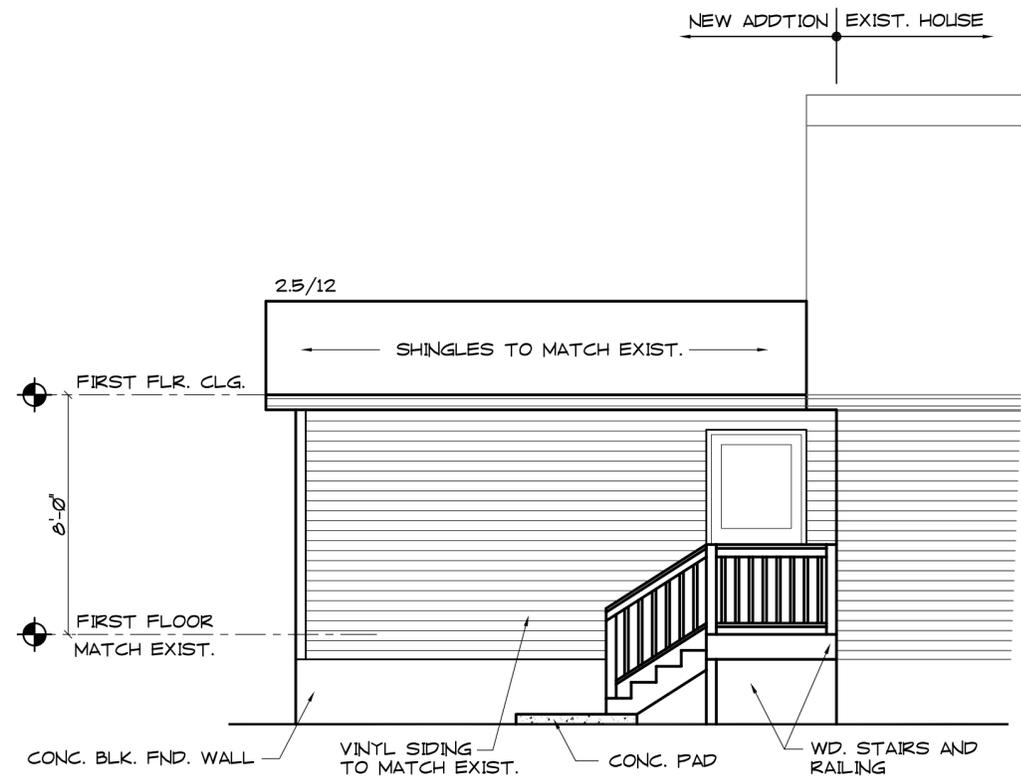
REAR ELEVATION

SCALE: 1/4" = 1'-0"



RIGHT SIDE ELEVATION

SCALE: 1/4" = 1'-0"



LEFT SIDE ELEVATION

SCALE: 1/4" = 1'-0"

ADVANCED CONSTRUCTION AND RESIDENTIAL DESIGN / DARLENE RUTKOWSKI-HANKS ASSUMES NO LIABILITY FOR ANY HOME CONSTRUCTED FROM THIS PLAN AND SHALL BE HELD HARMLESS FOR ANY CLAIMS ARISING PRIOR TO, DURING OR AFTER ANY CONSTRUCTION. THE PURCHASER OF THIS PLAN SHALL VERIFY ALL DIMENSIONS AND COMPLIANCE WITH ALL LOCAL BUILDING CODES AND ORDINANCES PRIOR TO CONSTRUCTION.

A NEW ADDITION FOR: COLTEN & MIRIAH STROTHEIDE			ACARD Advanced Construction And Residential Design (618) 910-8290
LOCATION: 834 HALE AVE, EDWARDSVILLE, IL			
DATE: 1/27/2026	DRAWN BY: ACARD - D.R.H.	PROJECT NO. 26-01	



RESIDENTIAL BUILDING PERMIT APPLICATION PACKET

Please read the attached material.

The following documents from this packet must be completed and returned for a residential building permit application to be accepted:

- Application for Plan Examination and Building Permit
- Page 4 from the Single Family Residential Building Permit Policy for New Construction, Additions, and Remodels
- Site, Drainage, & Erosion Control Plan
- Full site plan of entire property
- Specification Sheet
- Cross Connection Survey
- Truss Drawing Package
- Completed Energy Conservation Code Specification Sheet (and associated reports based on selected method)
- Manual J, S, and D (if applicable)
- Four (4) Sets of Plans (1/4" scale) *4 sets*

Revised 03/15/2023



PLAN REVIEW COMMENT FORM

City Issued Project #:

Please complete all required fields to help us respond to your Permit Application efficiently.

PROJECT NAME:	Stromeide Home Addition
PROJECT ADDRESS:	834 Hale Ave
PARCEL ID:	14-2-15-14-08-204-008
DATE OF SUBMITTAL:	March 2 2026
REVIEW TYPE:	<input checked="" type="checkbox"/> Initial Review <input type="checkbox"/> Re-submittal Review (Version: _____) <input type="checkbox"/> Final Review <input type="checkbox"/> Other: _____
DESCRIPTION OF PROJECT – Please briefly describe the scope of the project:	
add a room off the back of the house	

Type of Plan Being Submitted (check all that apply):

- Site Development Plan
- Building Permit Plan
- Zoning Review
- Other (please specify): _____
- Subdivision Plan
- Stormwater / Drainage Plan
- Fire Department Review

OWNER INFORMATION

NAME	Miriah ^(Harris) Stromeide
ADDRESS	834 Hale Ave
CITY, STATE, ZIP	Edwardsville IL 62025
EMAIL ADDRESS	<input type="checkbox"/> Preferred Method of Contact
PHONE NUMBER	<input checked="" type="checkbox"/> Preferred Method of Contact

GENERAL CONTRACTOR / PROJECT MANAGER (IF APPLICABLE)

NAME	Pat Kohler Skyline Custom Homes Corp
ADDRESS	135 Kingsbrooke Blvd
CITY, STATE, ZIP	Glen Carbon 62034
EMAIL ADDRESS	customhomes.skyline@gmail.com <input type="checkbox"/> Preferred Method of Contact
PHONE NUMBER	618-781-3831 <input type="checkbox"/> Preferred Method of Contact

Both



PLAN REVIEW COMMENT FORM

City Issued Project #:

Plan Review Comments for Review and Resubmittal should be sent to:

NAME	COMPANY	EMAIL ADDRESS

QUESTIONS OR ADDITIONAL COMMENTS:

--

Applicant Acknowledgment

I, the undersigned, acknowledge that Plan Review comments may require revisions to be addressed in subsequent submittals or prior to permit issuance/construction.

Owner/Applicant Signature		
General Contractor Signature		

NO WORK NOTICE

With the exception of Erosion Control and marking of property lines, building stakes, easements and utilities

ABSOLUTELY

No work may begin until a Permit is issued and has been paid.

No removal of vegetation.

No grading work.

No stock piling or bringing in dirt.

No digging or excavation for post holes, footing, or foundations.

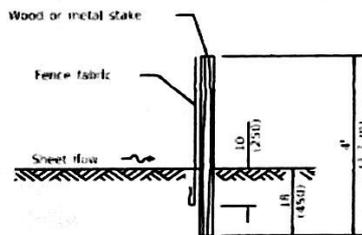
Pre Permit Site Inspection & Required Erosion Control

Following permit application submittal, the applicant must meet on site with the Building Inspector to go over Pre-Permit Erosion Control installation requirements, discuss easements, storm water drainage, site grading, rock driveways, retaining walls, and other site issues.

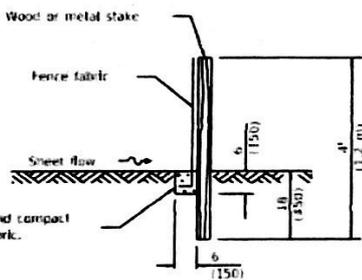
Pre-Permit Erosion Control must be installed and approved before the Permit will be issued. All remaining required Erosion Control and rock driveway must be installed immediately after the foundation is completed and as directed otherwise.

All Erosion Control must be maintained at all times until sod is installed and/or vegetation has grown back (not just seed and straw placed). Violations will result in immediate Stop Work Order and possible citation.

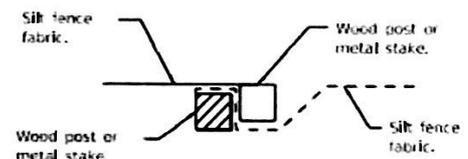
Proper Silt Fence Installation



SLICE METHOD



TRENCH METHOD



Place end-post (stake) of first silt fence adjacent to end-post (stake) of second silt fence with fabric positioned as shown.

STEP 1



Rotate posts (stakes) together 180° clockwise and drive both posts (stakes) 1.8 (45) into ground.

STEP 2

ATTACHING TWO SILT FILTER FENCES

(Not applicable for Hooks)

Rev 03/15/2023

SINGLE FAMILY RESIDENTIAL BUILDING PERMIT POLICY FOR NEW CONSTRUCTION, ADDITIONS, and REMODELS

Business Hours:

Our workday is 8:00 a.m. – 4:30 p.m. Monday through Friday, except City Holidays.

Permit Application, Fees and Plans:

Please include four (4) sets of plans (*1/4 "per foot scale" minimum*) with the building permit application submitted for approval. Two approved set of plans will be returned to you. One copy is for your file and the other must be maintained at the jobsite.

Inspections will not be made unless approved plans are available at the job site. Please note that all work will be held to the approved plans. If work does not coincide with the approved plans it could lead to a failed inspection.

Plan Review:

We endeavor to complete your plan review as quickly as possible. Typical review time for a single family residential permit is 7 to 14 working days. Plans are reviewed for compliance with the following codes:

International Residential Code – 2021 Edition
International Fire Code – 2021 Edition
NFPA 101 Life Safety Code
Illinois State Plumbing Code (NOTE: Plumber must be Illinois State Licensed)
National Electrical Code – 2020 Edition
International Mechanical Code – 2021
International Property Maintenance Code – 2021 Edition
Illinois Energy Code / International Energy Conservation Code
Americans with Disabilities Act
Illinois Accessibility Code
City Land Development Code & Zoning Ordinance

If during plan review, additional information is requested or the required information is incomplete, the review time is suspended until the requested information is submitted and logged in at the Department of Public Works.

Building Permit Required:

Please remember, no construction work may begin, including excavation, footing, or foundation, until a building permit is issued. Construction without a building permit is a violation and subject to a fine of not more than \$750.00 for each day the violation occurs.

Amended 01/24/2024

An issued building permit becomes invalid if the work is not commenced within 90 days after issuance of the permit or if the work is abandoned for 180 days after the time of commencing work. Building permits expire one year from the date of issuance.

The building permit card *MUST* be posted, protected from the weather and visible from the street before an inspection will be made. Failure to post the permit card will result in a failed inspection, and a \$25.00 re-inspection fee will be assessed.

Site & Drainage and Erosion Control:

See enclosed requirements sheet.

Erosion Control Barrier:

City ordinances requires soil erosion control around the entire building site where water leaves the property. It is the responsibility of the owner/contractor to install and maintain the erosion control at all times until new vegetation has been re-established.

Rocked Driveways:

Each building construction site shall have its driveway (as delineated on the building permit site plan) rocked to a minimum depth of six inches. All deliveries of building materials of all kinds shall be made using this rock driveway, without exception. All mud, dirt, rock and other debris on the streets must be cleaned up by the end of each workday.

Dumpster and Sanitary Facilities Required:

Each building construction site shall have an on-site dumpster to contain all construction debris generated by the construction activity on said site, and all debris from each building site shall be placed in the dumpster by the end of each workday. Each building site shall provide a toilet and hand-washing facility to use by the construction workers. Failure to maintain these items throughout the construction project may subject the permit holder to failing a building or site work inspection. Burning or burying trash on the site is strictly prohibited.

Inspection Scheduling:

With the exception of plumbing inspections, same day inspections, subject to availability, may be requested by calling us at 618-692-7535 before 9:30 a.m. Monday through Friday. *Plumbing Inspections* may be arranged by calling the above number before 2:00 p.m. Monday through Friday. Plumbing inspections are currently performed in the evenings. (NOTE: An Illinois licensed plumber is required for plumbing work if plumbing is not done by the **owner who will reside in the home for at least 6 months after completion of work.** (Ref. - 225 ILCS 320/3(2))

Inspection Fees:

The building permit fee includes an initial inspection and one re-inspection of all required inspections during the construction phase. Additional re-inspections beyond the first may be charged to the permittee at the rate of \$25.00 per inspection. A paid receipt

Amended 01/24/2024

must be presented at the Dept. of Public Works before further re-inspections or additional inspections will be scheduled or performed.

Occupancy Permit Required:

A Certificate of Occupancy indicating completion of work shall be obtained prior to any occupancy of a structure. Effective May 1, 2000, it is necessary to provide evidence of an Occupancy Permit in order to change the water service for new construction over from the builder's name to a new occupancy. Occupancy Permits are issued upon satisfactory completion of all City required inspections.

Amended 01/24/2024

We thank you for taking the time to read all of the attached information. We hope it helps your building project progress smoothly. Please read and sign below. This sheet is to be returned along with your building permit packet submittal.

*I have read the building permit policies for the City of Edwardsville. I have received a copy of the **Residential Building Code Highlights**, and I understand that I am responsible for full compliance with all of the codes, policies, and inspection requirements. I agree to provide copies of the information to all sub-contractors and material suppliers and to make sure that they are aware of these codes, policies and inspections.*

I understand that I am subject to an immediate "Stop Work Order" and Municipal Citation if my sub-contractors or I do not comply with these codes, policies and inspections.

The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating the performance of construction including home owner association board approval.

Date: 3/2/26

[Redacted Signature]

Permitee Signature

Miriah Strotheide

Permitee Name (Printed)

834 Hale Ave

Construction Information:

Street Address

Project 9-1-1 Address

Edwardsville IL 62025

City, State, Zip Code

Lot & Subdivision

[Redacted Phone Number]

Daytime/Cell Phone # (Where we can reach you)

[Redacted Email Address]

Email Address (Please print clearly)

Amended 01/24/2024

Site, Drainage, & Erosion Control Plan

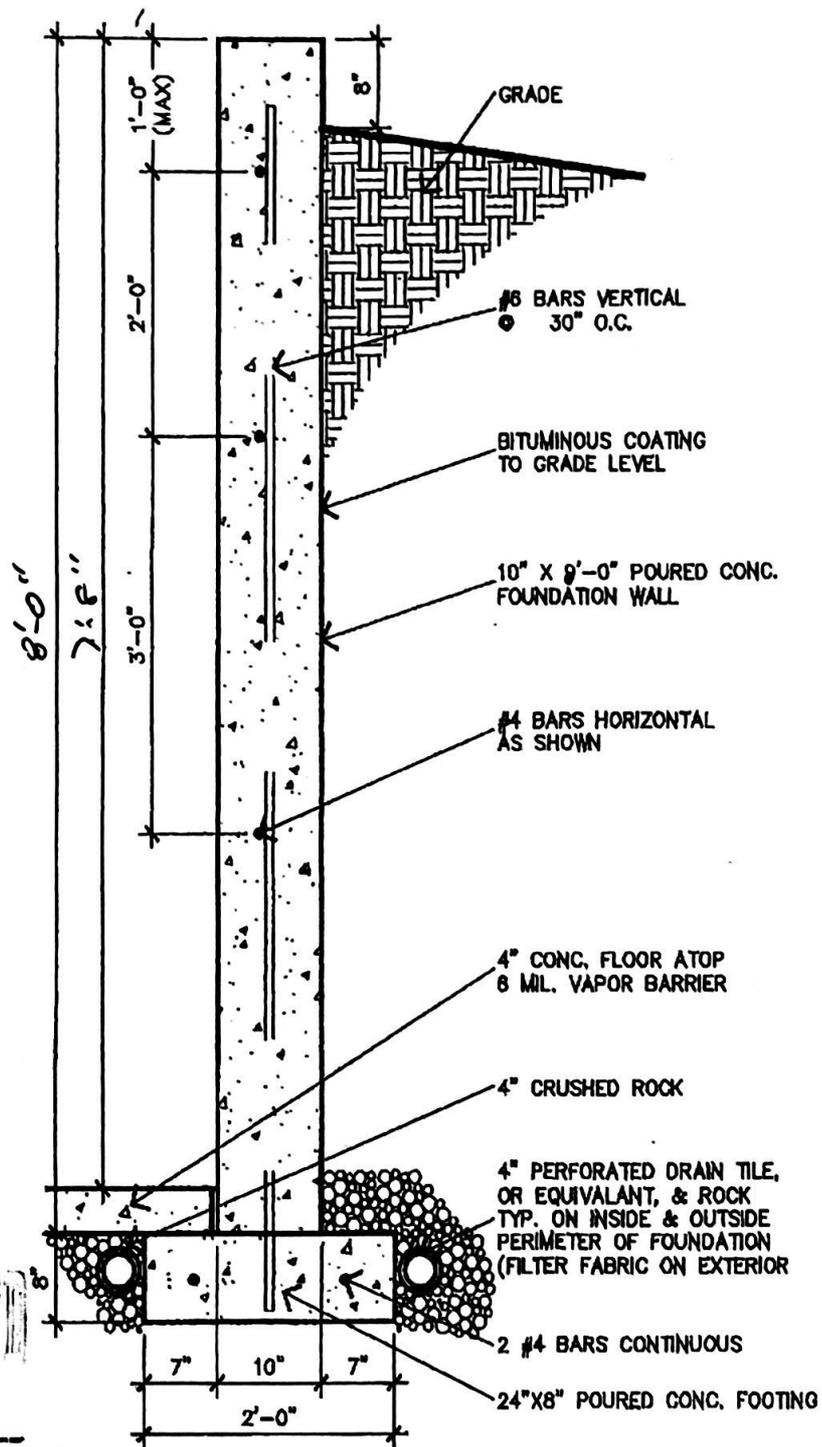
*** Please include the following and initial each item verifying its inclusion ***

1. Dimensions of proposed building / construction, existing buildings and entire lot, (to scale).
2. Setbacks from edge of building, cantilever walls, bay windows and fireplaces to all lot lines.
3. Show all easements, underground utilities and equipment, man holes, fire hydrants, storm water facilities, and structures. NOTE: THE CHANGING OF GRADE, FILLING IN, STOCK PILE IN ANY EASEMENTS IS STRICTLY PROHIBITED.
4. Identify street names.
5. Show basement opening locations and elevation of openings (including below grade window wells) – Concrete sill of opening or the top of the window wells shall be a minimum of 4 inches above the finished grade of yard. The yard shall slope away from the foundation at least 6 inches in 10 feet. Basement openings should not be installed on a building wall next to a side yard drainage easement. All basement openings must be above the overflow path of a downstream culvert.
6. Show driveway location (minimum of 5 feet from side property lines).
7. Show elevation of garage finished floor (min. 1 foot, max 3 feet above back of curb). The standard residential elevation is 2 feet above the back of curb.
8. Show location of exterior A/C unit (should not be placed next to a drainage way).
9. Show location of any proposed or potential retaining walls.
10. Show the “lowest floor level elevation” or the “lowest entry elevation level” as may be required by recorded subdivision plat or flood zone maps.
11. **Drainage** – show the direction of flow of stormwater at the sides and the rear lot lines. NOTE: Filling in established drainage ways, easement, or blocking the flow of stormwater along the lot lines is a violation of the City Stormwater Ordinance.
12. **Erosion Control Plan** – City ordinances requires Soil Erosion Control around the entire building site where water leaves the property. Show location of Erosion Control. (See attached “No Work Notice” sheet)
13. Show Sanitary Sewer Service, Sump pump outlet, and water service line locations. (Please anticipate outside water meter pit unless otherwise approved by City Engineer.)
14. Sign & Date Plan (Modification of Sealed plans or drawings is not allowed or accepted).


Builder's Signature

2-1-26
Date

Revised 03/15/2023



BY: _____

A | **WALL SECT**
 SCALE: 3/4" = 1'-0" 10"

DATE	
BY	



City of Edwardsville – Public Works Department
Specification Sheet
Based on 2021 International Residential Building Code

Soils/Geotechnical

Material Classification _____

Load Bearing Pressure (PSF) _____

Footing

Size (Depth x Width) 24" x 8"

Reinforcement (Size and Spacing) 2 #4 Bars Continuous

Note: reinforcing steel bars must be per 2021 IRC requirements and as specified in approved plans.

Foundation

Poured Concrete or Masonry _____

Wall Dimensions (Thickness x Height) 10" Thick 8' Tall

Vertical Reinforcement (Size and Spacing) #6 30" OC

Horizontal Reinforcement (Size and Spacing) #4

Note: reinforcing steel bars must be per 2021 IRC requirements and as specified in approved plans.

Crawl Space Height (18" min.) _____

Note: crawl space height, ventilation and access

Termite Shield Material Alm

Sill Plate Attachment 2x4 Sill Plate 1/2" x 10" anchor bolts embedded > 7" 3"x3" washers 6' OC
Example: 2x4 sill plate, 1/2"x10" anchor bolts (Embedded 7") & 3"x3" washers at 6ft o.c.

Main Support Beam(s) Size No Beam

Floor Joist Type & Size 2x12's

Note: Vapor Barrier must be of 10 mil. plastic over a min. of 4" clean rock.

Exterior

Exterior Wall Sheathing Material 7/16 OSB Zip system

Exterior Insulation (If applicable) _____

House Wrap / Water Resistive Barrier Zip System

Exterior Wall Finish Dynl

Revised 3/15/2023

Interior

Subfloor Material 3/4" T & G
Load Bearing Wall Bracing & Headers 2 X 12's
Non-Load Bearing Wall Bracing & Headers 2 X 12's
Wall Studs (size) 92 5/8" Fur (material) 2 X 6 @ 16" O.C.
Stud Cavity Insulation (Type and R-Value) _____
Wall Finish (drywall or plaster) _____
Ceiling (Attic) Insulation (Type and R-Value) R 49
Ceiling Finish (drywall or plaster) 5/8 Drywall ceilings 1/2" walls
Finish Floor(s) LVA Carpet

Roof

Truss or Stick-Framed _____ @ 24" O.C.
Roof Slope 25/12
Sheathing Paper Synthetic felt
Roof Covering (asphalt, slate, tile, etc.) asphalt Certain teed LandMark Driftwood
Trusses _____ @ 24" O.C.
Roof Rafters / Ceiling Joists (if stick framed) _____ @ _____ O.C.
Roof structure to Top Plate connection type _____

Grading

What is planned for the excess dirt excavated from the jobsite? Haul away
The excess Dirt



City Of Edwardsville

Public Works Department

200 East Park Street
Edwardsville, IL 62025

Cross Connection Survey

Resident	Miriah Harris Shomeide		
Property Address	834 Hale Ave		
Mailing Address	834 Hale Ave Edwardsville IL 62025		
Phone	[REDACTED]	Email	[REDACTED]
Account # (found on City utility bill)	01-03330-05		

In order to protect the City of Edwardsville's water supply from becoming contaminated, the Illinois Environmental Protection Agency, requires a survey to determine if there are any hazardous conditions that could affect our drinking water.

This must be turned in with your building permit application.

Type of Use: Residential Commercial Medical Industrial
 Government Agricultural Other _____

Check all that apply

- Do you have any other source of water, such as private well, pond, lake, tank or reclaimed water that is connected to the public water supply? Yes No

- Are there any backflow prevention devices installed on the premises?
This does not include devices installed on the City water meter or outside water/garden hose. Yes No
 - If so, has the device been tested? (If yes, please provide a copy of the test results). Yes No

- Do you have a permanent in-ground lawn irrigation system installed on your property?
This does not include lawn water devices attached to a garden hose. Yes No

- Do you have a sump pump on your property? Yes No
 - If so, does it connect to the City sewer? Yes No

- Do you have a swimming pool and/or hot tub? Yes No
 - Is the above filled by a permanent connection to the water system? Yes No

- Is your facility heated by a boiler? Yes No

Do you have any of the equipment listed below on the premises? (Check all that apply)

Fire sprinkler system	<input type="checkbox"/>	Truck or tank filling equip	<input type="checkbox"/>	Baptismal fountain/tub	<input type="checkbox"/>
Temporary service	<input type="checkbox"/>	Soft drink dispenser	<input type="checkbox"/>	Water softener	<input type="checkbox"/>
Car wash facilities	<input type="checkbox"/>	Water cooled equip	<input type="checkbox"/>	Shampoo bowl	<input type="checkbox"/>
Chemical feeder	<input type="checkbox"/>	Pressure booster	<input type="checkbox"/>	Soap injector	<input type="checkbox"/>
Sterilizer	<input type="checkbox"/>	Industrial fluid system	<input type="checkbox"/>	Photo Processor	<input type="checkbox"/>
Steam equip	<input type="checkbox"/>				
Outdoor yard hydrant (a plumbing fixture that stands upright out of the ground)					<input type="checkbox"/>



PERMIT NO. _____

City of Edwardsville APPLICATION FOR BUILDING PERMIT

Date 3/2/16
Name of Owner Mirinda Harris Strohecker Current Address 834 Hale Ave City Edwardsville
Project Address 834 Hale Ave Phone [REDACTED]
Subdivision _____ Lot No. _____ Property Identification No. 14-2-15-14-08-204-008

Type of Structure		Type of Work	
Single-Family <input type="checkbox"/>	Commercial <input type="checkbox"/>	New Construction <input type="checkbox"/>	Sign <input type="checkbox"/>
Two-Family <input type="checkbox"/>	Industrial <input type="checkbox"/>	Remodeled <input type="checkbox"/>	Electrical Only <input type="checkbox"/>
Multi-Family <input type="checkbox"/>	Office/Prof. <input type="checkbox"/>	Garage <input type="checkbox"/>	Plumbing Only <input type="checkbox"/>
No. of Units _____	Other <u>room addition</u>	Roof <input type="checkbox"/>	Mechanical Only <input type="checkbox"/>
Rental (please initial) _____	<input type="checkbox"/> No <input type="checkbox"/> Existing <input type="checkbox"/> Future		

Estimated Cost: Building 100,000 Electrical 10,000 Plumbing 10,000 Mechanical 15,000

Scope of work: add a 28'x18' room on back of Home

Building

Contractor Skyline Custom Homes
Address 35 Kingsbrooke Blvd 62034
Phone No. _____ Cell No. 618-781-3831
Email Address customhomes.skyline@gmail.com
Type of Construction _____
Stories _____ Width _____ Depth _____
Total Building Area _____
of Rooms _____ Baths _____
Basement: None Unfinished
Finished Area _____
Garage /Carport _____
of Parking Spaces: Enclosed _____ Outdoors _____
IL Roofing License # _____

Plumbing

Contractor Ten Pin Plumbing
Address _____
Phone No. _____ Cell No. 795-1279
Email Address lukehauling@gmail.com
W. Closets 2 Sinks 3
Bathtubs/Showers (2) Showers _____
Floor Drain _____ Service Sinks _____
Size Wtr. Conn. _____ Backflow Prev. _____
Grease Trap _____ Other _____
IL License # 055 - _____

Electrical

Contractor Dedicated Electric
Address _____
Phone No. _____ Cell No. 781-6117
Email Address dave.pouenergy@gmail.com
Service: Overhead Underground
Service Size: _____
Panel #1: _____ AMPS _____ VOLTS _____ PHASE _____ WIRE
Panel #2: _____ AMPS _____ VOLTS _____ PHASE _____ WIRE
Example: 200 AMPS 208Y/120 VOLTS 3 PHASE 4 WIRE

Mechanical

Contractor Schmidt & Son
Address _____
Phone No. _____ Cell No. 781-5043
Email Address Schmidt heating and cooling@yahoo.com
Heat: Quantity _____ Type _____ BTU _____
Flue _____ Fuel Line Size _____
Water Heater: Quantity _____ Type _____ BTU _____
Flue _____ Gallons _____
Air Conditioner: Quantity _____ Total Tonnage _____
Special Item _____ Qty _____

I hereby affirm the above statements are true and correct and comply with the provisions of the ordinances of the City of Edwardsville and adopted codes. I understand that I may need additional approval for the proposed improvements from the homeowner's association if applicable. I hereby certify that the proposed work is authorized by the owner of record and approval has been given by the owner for submission of such application.
Printed Name Pat Kohler (Signature) [REDACTED]

Reviews: (OFFICE USE ONLY)

Building ADA Mechanical
 N/A Approved _____ by _____
 Electrical: N/A Approved _____ by _____
 Plumbing: N/A Approved _____ by _____
 Rental: N/A Approved _____ by _____
 Fire: N/A Approved _____ by _____
 Esmnt/Strmwtr: N/A Approved _____ by _____
 Zoning Parking Landscaping
 N/A Approved _____ by _____
 Permit Authorization Signature: _____ Date: _____