



Certificate of Appropriateness Application Renovation

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

planningtech@capecharles.org

Revised 12/2024

Taxes	Paid
Violations	NA
Fee	\$500
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: 439 Mason Ave.

Tax Map #: 83A3-5-1

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

Zoning District: R-1

PART 3: PROPERTY OWNER INFORMATION

Name and/or Company: Bruce + Jane Gittinger

Mailing Address: 4 Tazewell Ave. Cape Charles, VA 23310

Phone Number: 703-340-9037

Email: jonegittinger@hotmail.com

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

Mailing Address: P.O. Box 1090 Cheriton, VA 23316

Phone Number: 757-331-4560

Email: heatherbehrensqs@gmail.com

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

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

Remove existing vinyl windows and replace with Anderson 100 series windows in same size. Remove + replace vinyl siding with Hardi lap siding in 7" exposure.

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:

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: ☐ Original ☐ Not Original ☐ 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: ☐ Yes ☐ No ☐ Not Sure	Work to be completed: ☐ Added ☐ Removed ☐ Repaired ☐ 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 1

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:
Original to the home: ☒ Yes ☐ No ☐ Not Sure	☐ Added ☒ Removed ☐ Repaired ☐ Replaced <i>same sizes + style</i>
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture 4/4, 16-lite, 4/4	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture 4/4, 16-lite, 4/4
Width: 83-1/2" Height: 53-1/2" Depth:	Width: 83-1/2" Height: 53-1/2" Depth:
Existing Material: <i>Vinyl</i>	Proposed Material: <i>Fibrex</i>
Sill: Length: _____ Thickness: _____ Depth: _____	Sill: Length: _____ Thickness: _____ Depth: _____
Existing Material: Vinyl	Proposed Material: AZEK
Casing / Trim: Width: _____ Height: _____ Depth: _____	Casing / Trim: Width: _____ Height: _____ Depth: _____
Existing Material: Vinyl	Proposed Material: AZEK
Shutters: Original: ☐ Yes ☒ No (Attach Location Picture)	Shutters: ☒ Repair ☐ Replace ☐ New (Attach Location Picture)
Existing Material: <i>Vinyl</i>	Proposed Material: <i>putting up the existing shutters</i>
Indicate the reason for change: <i>Upgrade</i>	

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: ☐ Original ☐ Not Original ☐ Not Sure	Proposed
Existing Material:	Proposed Material:
Dimensions: Length: _____ Width: _____ Depth: _____	Dimensions: Length: _____ Width: _____ Depth: _____
CEILING	
Existing Condition: ☐ Original ☐ Not Original ☐ Not Sure	Proposed
Existing Material:	Proposed Material:
COLUMNS	
Existing Condition: ☐ Original ☐ Not Original ☐ 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

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 <u>2</u>	
Minimum Guidelines: <u>Window Sill</u> – thickness of 1-1/2" and <u>Window Casing or Trim</u> – 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: ☐ Yes ☒ No ☐ Not Sure	Work to be completed: ☐ Added ☐ Removed ☐ Repaired ☒ Replaced
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>8/8</u>	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>8/8</u>
Width: <u>35-1/2"</u> Height: <u>59-1/2"</u> Depth:	Width: <u>35-1/2"</u> Height: <u>59-1/2"</u> Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>Fibrex</u>
Sill: Length: Thickness: Depth:	Sill: Length: Thickness: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Casing / Trim: Width: Height: Depth:	Casing / Trim: Width: Height: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Shutters: Original: ☐ Yes ☐ No (Attach Location Picture)	Shutters: ☐ Repair ☐ Replace ☐ New (Attach Location Picture)
Existing Material:	Proposed Material:
Indicate the reason for change: <u>Update</u>	

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 <u>1</u>	
Minimum Guidelines: <u>Window Sill</u> – thickness of 1-1/2" and <u>Window Casing or Trim</u> – 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: ☐ Yes ☒ No ☐ Not Sure	Work to be completed: ☐ Added ☐ Removed ☐ Repaired ☒ Replaced
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>6/6</u>	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>6/6</u>
Width: <u>23-1/2"</u> Height: <u>53-1/2"</u> Depth:	Width: <u>23-1/2"</u> Height: <u>53-1/2"</u> Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>Fibrex</u>
Sill: Length: Thickness: Depth:	Sill: Length: Thickness: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Casing / Trim: Width: Height: Depth:	Casing / Trim: Width: Height: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Shutters: Original: ☐ Yes ☐ No (Attach Location Picture)	Shutters: ☐ Repair ☐ Replace ☐ New (Attach Location Picture)
Existing Material:	Proposed Material:
Indicate the reason for change: <u>Update</u>	

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 <u>4</u>	
Minimum Guidelines: <u>Window Sill</u> – thickness of 1-1/2" and <u>Window Casing or Trim</u> – 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: ☐ Yes ☒ No ☐ Not Sure	Work to be completed: ☐ Added ☐ Removed ☐ Repaired ☒ Replaced
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>1/1</u>	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>1/1</u>
Width: <u>35-1/2"</u> Height: <u>59-1/2"</u> Depth:	Width: <u>35-1/2"</u> Height: <u>59-1/2"</u> Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>Fibrex</u>
Sill: Length: Thickness: Depth:	Sill: Length: Thickness: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Casing / Trim: Width: Height: Depth:	Casing / Trim: Width: Height: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Shutters: Original: ☐ Yes ☐ No (Attach Location Picture)	Shutters: ☐ Repair ☐ Replace ☐ New (Attach Location Picture)
Existing Material:	Proposed Material:
Indicate the reason for change: Update	

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 <u>1</u>	
Minimum Guidelines: <u>Window Sill</u> – thickness of 1-1/2" and <u>Window Casing or Trim</u> – 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: ☐ Yes ☒ No ☐ Not Sure	Work to be completed: ☐ Added ☐ Removed ☐ Repaired ☒ Replaced
Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>1/1</u>	Configuration (i.e., double-hung sash, 2/2, 6/1, 6/6, etc.): Include a picture <u>1/1</u>
Width: <u>23-1/2"</u> Height: <u>53-1/2"</u> Depth:	Width: <u>23-1/2"</u> Height: <u>53-1/2"</u> Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>Fibrex</u>
Sill: Length: Thickness: Depth:	Sill: Length: Thickness: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Casing / Trim: Width: Height: Depth:	Casing / Trim: Width: Height: Depth:
Existing Material: <u>Vinyl</u>	Proposed Material: <u>AZEK</u>
Shutters: Original: ☐ Yes ☐ No (Attach Location Picture)	Shutters: ☐ Repair ☐ Replace ☐ New (Attach Location Picture)
Existing Material:	Proposed Material:
Indicate the reason for change: Update	

BALUSTRADE	
Existing Condition: ☐ Original ☐ Not Original ☐ 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: ☐ Original ☐ Not Original ☐ Not Sure	Proposed Work: ☐ New ☐ Replace ☐ Repair
Existing Material:	Proposed Material:
SKIRTING	
Existing Condition: ☐ Original ☐ Not Original ☐ Not Sure	Proposed Work: ☐ New ☐ Replace ☐ 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: ☐ Original ☐ Not Original ☐ 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.):	
Number of Stoops to be: Repaired Replaced Altered	
Existing Condition: ☐ Original ☐ Not Original ☐ 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: ☐ Original ☐ Not Original ☐ 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 Siding		Proposed Siding	
Original to the home: ☒ Yes ☐ No ☐ Not sure			
Existing Material: <u>Vinyl</u>		Proposed Material: <u>Hardi siding</u>	
Dimensions: Thickness: <u>.044"</u> Width:		Dimensions: Thickness: <u>5/16"</u> Width: <u>8 1/4" - 7" exposure</u>	
Indicate the reason for change, e.g., underlying material condition, rot: <u>Upgrade</u>			
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: ☐ Original ☐ Not Original ☐ Not Sure			
Existing Material:		Proposed Material:	
Dimensions: Width:	Height:	Depth:	
Style / Design:		Style / Design:	
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		Proposed Masonry	
Existing Condition: ☐ Original ☐ Not Original ☐ Not Sure			
Existing Material:		Proposed Materials:	
Existing mortar:	Joints:	Mortar to be used:	Mortar joints:
Other / Additional Notes: <u>(Unpainted masonry cannot be painted.)</u>			
Existing Chimney		Proposed Chimney	
Show location and document conditions with photographs		☐ Repair ☐ Remove ☐ Add a chimney cap	
Indicate the reason for change and materials:			
J. HARDSCAPING ☒ Not applicable SEE SECTION 9.1 OF THE HISTORIC DISTRICT DESIGN GUIDELINES			
Location (Attach Site Plan/Survey & pictures):			
☐ Driveway:	Length:	Width:	Materials:
☐ Walkway:	Length:	Width:	Materials:
☐ 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: _____ Width: _____ Materials: _____
☐ 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 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: <u>Heather Behrens</u>	Date: <u>9/1/25</u>
Zoning Administrator's signature: _____	Date: _____
Zoning Ordinance Article VIII Section: <u>8.16 (C)(3)(c)</u>	

439 Mason Ave.

Front



Right side



Left side

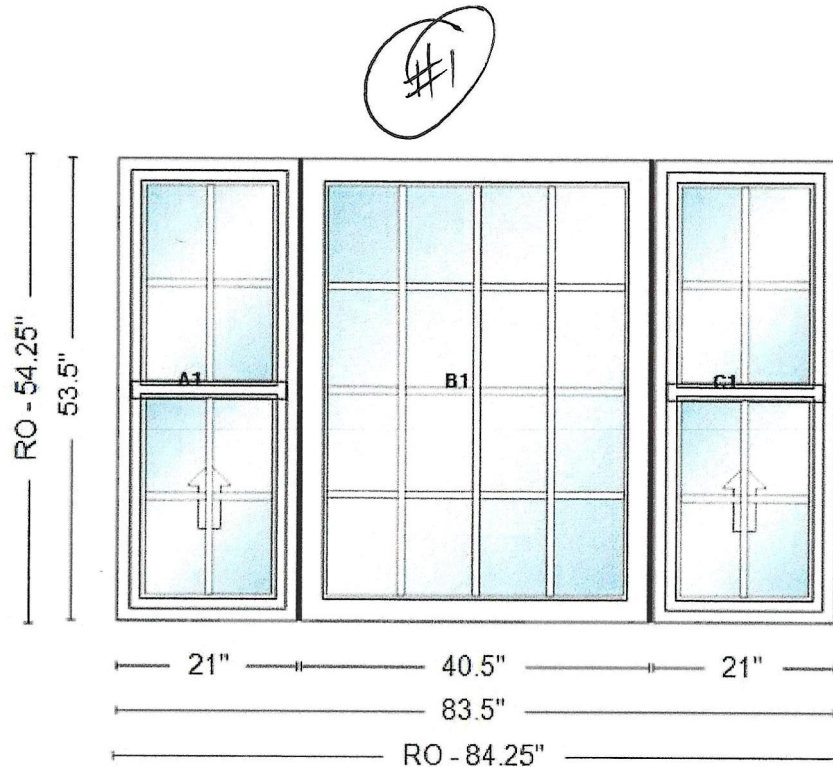


Rear



Unit Spec Report - Large Image

QUOTE NAME	PROJECT NAME	QUOTE NUMBER	CUSTOMER PO#	TRADE ID
Unassigned Quote	Unassigned Project	8091444		279610



Room: None Assigned

Item	Qty	Operation
500-1	1	Fixed/Active - Fixed - Fixed/Active

RO Size: 84 1/4" x 54 1/4"

Unit Size: 83 1/2" x 53 1/2"

Comments:

Unit 1, 3: 100 Series Single-Hung Unit 2: 100 Series Picture/Transom-SH, Low-E, Standard, Grilles: Unit 1 Lower, 1 Upper, 3 Lower, 3 Upper: Finelight, Colonial, Typical, 3/4", White, White, 2W2H Unit 2: Finelight, Colonial, Typical, 3/4", White, White, 4W4H, Vertical, Factory Muller, 1/2" Fiberglass Non Reinforced

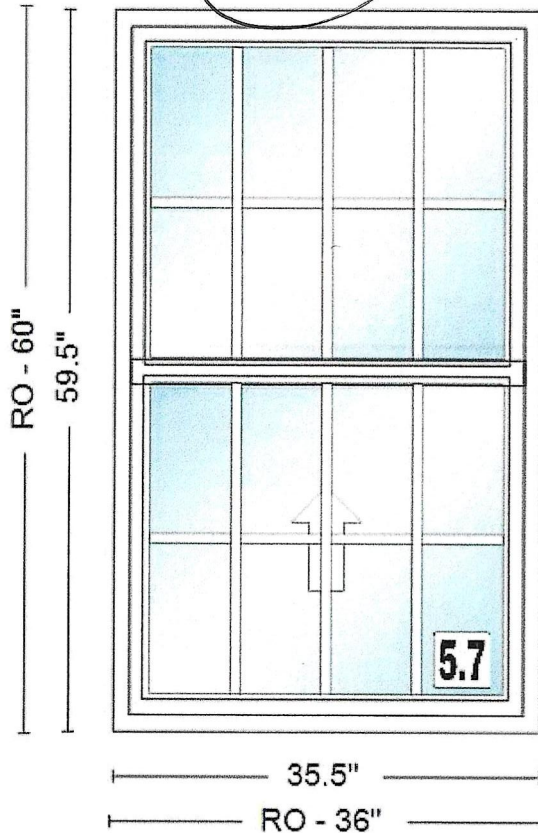
Instructions to Manufacturer:

Unit #	U-Factor	SHGC	ENERGY STAR
A1	0.3	0.28	NO
B1	0.28	0.29	
C1	0.3	0.28	

Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	17.5000	23.0390	2.79990
C1	17.5000	23.0390	2.79990

Unit Spec Report - Large Image

QUOTE NAME	PROJECT NAME	QUOTE NUMBER	CUSTOMER PO#	TRADE ID
Unassigned Quote	Unassigned Project	8091444		279610



Room: None Assigned

Item	Qty	Operation
400-1	1	Fixed/Active

RO Size: 36" x 60"

Unit Size: 35 1/2" x 59 1/2"

Comments:

100 Series Single-Hung, Low-E, Standard , Grilles: Finelight, Specified Equal Light, 3/4", White, White, 4W2H

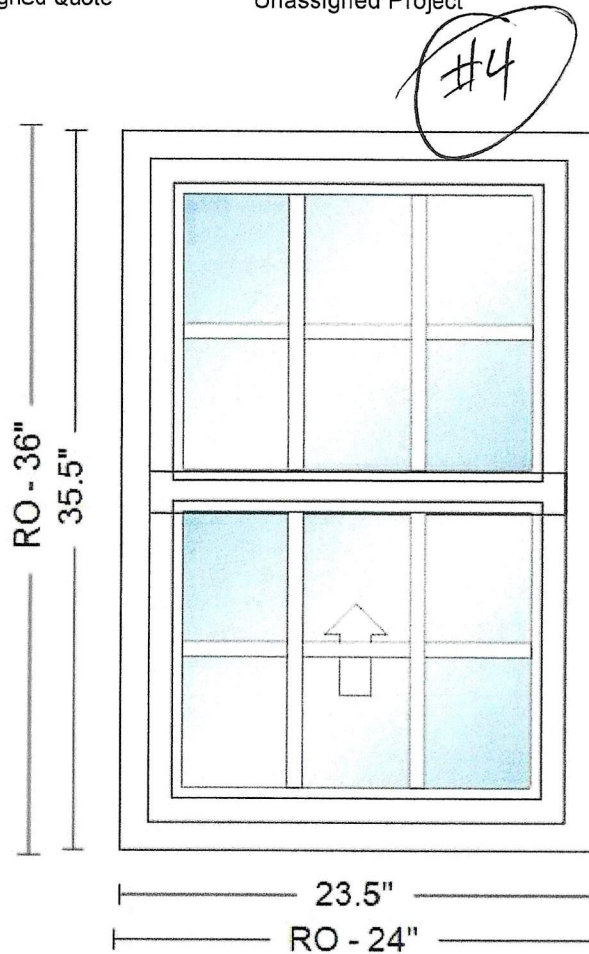
Instructions to Manufacturer:

Unit #	U-Factor	SHGC	ENERGY STAR
A1	0.3	0.28	NO

Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	32.0000	26.0625	5.79000

Unit Spec Report - Large Image

QUOTE NAME	PROJECT NAME	QUOTE NUMBER	CUSTOMER PO#	TRADE ID
Unassigned Quote	Unassigned Project	8091444		279610



Room: None Assigned

Item	Qty	Operation
200-1	1	Fixed/Active

RO Size: 24" x 36"

Unit Size: 23 1/2" x 35 1/2"

Comments:

100 Series Single-Hung, Low-E, Standard , Grilles: Finelight, Specified Equal Light, 3/4", White, White, 3W2H

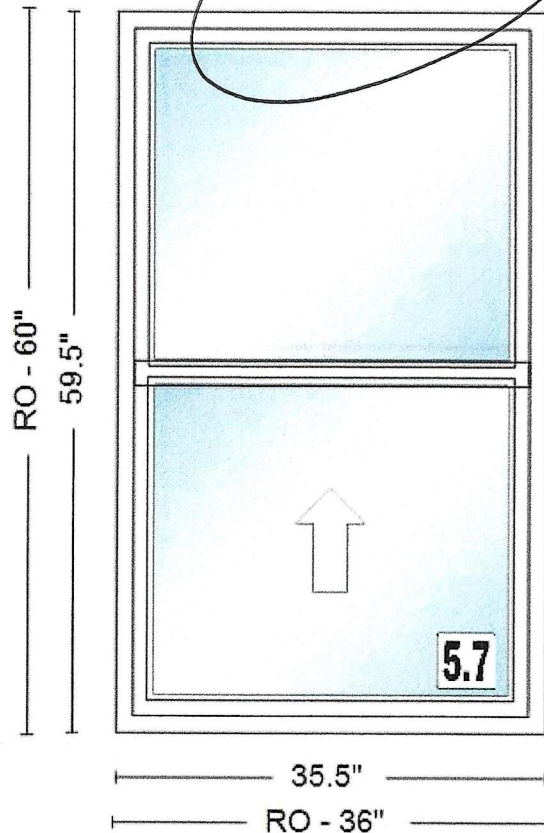
Instructions to Manufacturer:

Unit #	U-Factor	SHGC	ENERGY STAR
A1	0.3	0.28	NO

Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	20.0000	14.0625	1.95000

Unit Spec Report - Large Image

QUOTE NAME	PROJECT NAME	QUOTE NUMBER	CUSTOMER PO#	TRADE ID
Unassigned Quote	Unassigned Project	8091444		279610



Room: None Assigned

Item	Qty	Operation
300-1	1	Fixed/Active

RO Size: 36" x 60"

Unit Size: 35 1/2" x 59 1/2"

Comments:

100 Series Single-Hung, Low-E, Standard , Grilles: None

Instructions to Manufacturer:

Unit #	U-Factor	SHGC	ENERGY STAR
A1	0.3	0.31	NO

Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	32.0000	26.0625	5.79000

Unit Spec Report - Large Image

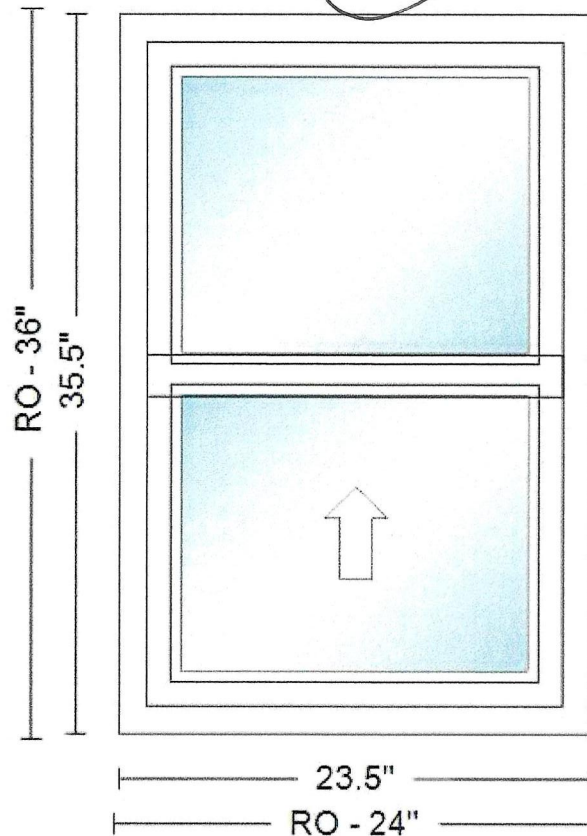
QUOTE NAME
Unassigned Quote

PROJECT NAME
Unassigned Project

QUOTE NUMBER
8091444

CUSTOMER PO#

TRADE ID
279610



Room: None Assigned

Item	Qty	Operation
100-1	1	Fixed/Active

RO Size: 24" x 36"

Unit Size: 23 1/2" x 35 1/2"

Comments:

100 Series Single-Hung, Low-E, Standard , Grilles: None

Instructions to Manufacturer:

Unit #	U-Factor	SHGC	ENERGY STAR
A1	0.3	0.31	NO

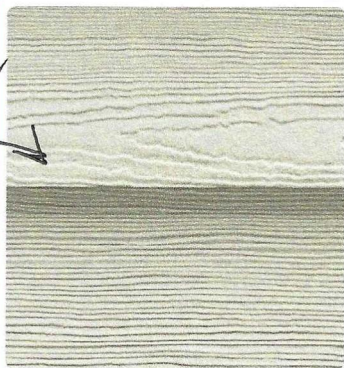
Clear Opening/Unit #	Width	Height	Area (Sq. Ft)
A1	20.0000	14.0625	1.95000



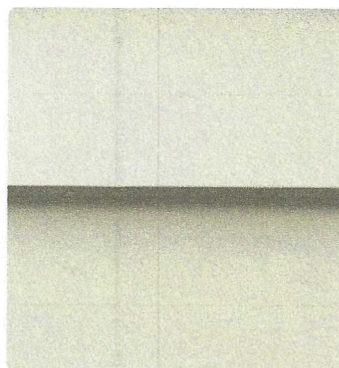
Individual colors may vary depending on display settings. Samples only available in Select Cedarmill® texture. Please check with your contractor or local dealer for availability in your area.

Select your texture

8 1/4"
w/ 7" exposure



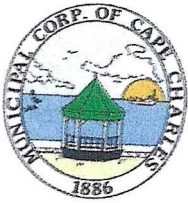
**Select
Cedarmill®**



Smooth



**Beaded Select
Cedarmill®**



Owner Affidavit for Permission to Represent

Planning & Zoning Department
757-331-3259 x24

planningtech@capecharles.org

Revised 9/2022

Taxes	
Violations	
Fee	
Decision	

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.

Property Information

Subject Property Street Address: 439 MASON AVE, CAPE CHARLES, VA

Subject Property Tax Map #: _____

Owner Information

Owner's name: Jone & Bruce Gittinger

Mailing address: 4 TAZEWELL

Phone number: 703-340-9037 Email: jonegittinger@hotmail.com

I hereby give authority to the following representatives to act on my behalf on the following matter:

Representative Information

Name: Q.S. LLC Heather Behrens

Mailing address: 21351 S. Bayside Rd, Cheriton, VA 23116

Phone number: 757-331-4569 Email: heatherbehrens95@gmail.com

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

Representative Information

Name: _____

Mailing address: _____

Phone number: _____ Email: _____

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

Signature of owner: Bruce Gittinger Date: 8/12/2025

State of Virginia, County of Northampton

The foregoing instrument was acknowledged before me this 12 day of August, 2025, by Bruce Gittinger (name of person acknowledged)

Signature of Notarial Officer: Elizabeth A. Hume

Notary Registration number: 275630

My commission expires: 1/31/2027

