

B) NEW CONSTRUCTION & DEMOLITION OR MOVING OF STRUCTURES

PROPERTY LOCATION: 1547 CADOTTE AVENUE 051-575-083-00
(Number) (Street) (Property Tax ID #)

LEGAL DESCRIPTION OF PROPERTY: SEE ATTACHED DRAWING
(Attach supplement pages as needed)

ESTIMATED PROJECT COST: _____

APPLICANT/CONTRACTOR

(Applicant's interest in the project if not the fee-simple owner): ARCHITECT

Name: Tamara Burns, HopkinsBurns Design Studio **Email Address:** tamara.burns@hopkinsburns.com

Address: 113 S. Fourth Ave Ann Arbor MI 48104
(Street) (City) (State) (Zip)

Telephone: _____
(Home) (Business) (Fax)

I certify that the information provided in this Application and the documents submitted with this Application are true to the best of my information, knowledge and belief.

Signature: [Signature] **Date:** 10/23/2025

PROPERTY OWNER(S) AND ALL PARTIES WITH A CLAIM OF RIGHT IN PROPERTY¹ This includes mortgagees, easement holders, and lien holders. You may be asked to provide a title search of the property and if the estimated is in excess of \$250,000 you are required to do so. Attach additional pages listing the person(s) or entity(ies) with legal interest(s) in the property and the nature of the legal interest(s).

Name: GHMI RESORT HOLDINGS LLC **Email Address:** djurcak@grandhotel.com

Address: 100 ST PAUL ST. STE 800 Denver 80206
(Street) (City)
Telephone: _____
(Home) (Business) (Fax)
File No. 025-083 (State) 09641
Exhibit A
Date 10.27.25
Initials

The undersigned certify(ies) and represent(s)

1. That he/she, it or they is (are) all of the fee title owner(s) of all of the property involved in the application; and
2. That he/she, it or they has (have) attached a list which identifies all parties with a legal interest in the property at issue other than the undersigned owner(s) and has (have) identified the nature of each legal interest; and
3. That the answers and statements herein attached and materials provided are in all respects true and correct to the best of his, her, its or their information, knowledge and belief. The undersigned hereby further certify(ies) and represent(s) that he/she, it or they has (have) read the foregoing and understand(s) the same.
4. That the property where work will be undertaken has, or will have before the proposed project completion date, a fire alarm system or a smoke alarm complying with the requirements of the Stille-DeRossett-Hale single state construction code act, 1972 PA 230, MLC 125.1501 to 125.1531.

Signature [Signature] **SIGNATURES** [Signature]
Signature [Signature] **Signature** [Signature]

Please Print Name TAMARA E. L. BURNS **Please Print Name** _____

Signed and sworn to before me on the 23RD day of OCTOBER, 2025.

DAVID K. PATE
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF WASHTENAW
My Commission Expires Mar. 25, 2027
Acting in the County of WASHTENAW

Notary Public
WASHTENAW County, Michigan

My commission expires: MARCH 25, 2027

¹ The decision by the Historic District Commission may be in the form of Restrictions to which such Parties may be required to agree. (revised 04/17)