

CERTIFICATE OF APPROPRIATENESS APPLICATION MAJOR WORK
PLEASE TYPE OR PRINT
Street Address: 416 N. 5th AUE, LOT 2
Tax Parcel Number: R04813 - 034 - 030 - 000
Property Owner Information If the applicant is not the property owner, an agent form (below) is required to be signed by the property owner and submitted with an application. Application must be signed by all legal property owners.
Owner name(s): Commonwealth CAPITAL GROUP LLC
Mailing Address: 2001 COUNTRYWOOD NORTH, RALEIGH, WC 27615
Phone: 919-780-7870 Email address: MLASONDE agmail. com Signature: Muhaul Lasondo
Date: <u>8-4-24</u>
AGENT FORM (This section is required if the applicant is anyone other than the property owner)
I MINE LASONDE the undersigned owner, do hereby appoint
CLOVER GROUP, INC to act on my behalf for the purpose of petitioning the
city of Wilmington Historic Preservation Commission for a certificate of appropriateness, as applicable to the property described in the attached petition.
I do hereby covenant and agree with the city of Wilmington that said person (agent) has the authority to do the following acts for or on behalf of the owner:
Submit property petition and require supplemental materials
Appear at public meetings to give testimony and make commitments on behalf of the owner
 Accept conditions or recommendations made for the issuance of the certificate of appropriateness on the owner's property
 Act on the owner's behalf without limitations with regard to any and all things directly
or indirectly connected with or arising out of any petition for a certificate of appropriate- This appointment agreement shall continue in effect until final disposition of the petition submitted in conjunction with this appointment.
Owner(s) name(s): Michael Jasonde
Owner(s) signature: Muhal Larsna Date: 8-4-24
Designated agent name: CLOVER GROUP. IW C

Designated agent phone: —

614-774-1049 Email address: CLOVER ADM & OUTCOOK.

Designated agent address: 112 FRIEWALY LW, HAMPSTEAD, NC 28443