



## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.  
Please print legibly.

*Filed  
3/9/2012*

1. HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known)

*Concordia*

ADDRESS OF PROPERTY:

*926 N. 29 ST*

2. NAME AND ADDRESS OF OWNER:

Name(s): *Dale Dolence*

Address: *926 N 29 ST*

City: *Milwaukee*

State: *WI*

ZIP *53208*

Email: *dale@milwaukee*

Telephone number (area code & number) Daytime: *cell 414 331-0007* Evening: *414 344-1718*

3. APPLICANT, AGENT OR CONTRACTOR: (if different from owner)

Name(s): *Owner*

Address:

City:

State:

ZIP Code:

Email:

Telephone number (area code & number) Daytime: Evening:

4. ATTACHMENTS

A. REQUIRED FOR ALL PROJECTS:

Photographs of affected areas & all sides of the building (annotated photos recommended)

Sketches and Elevation Drawings (1 full size and 2 reduced to 11" x 17" or 8 1/2" x 11")

Material and Design Specifications (see next page)

B. NEW CONSTRUCTION/DEMOLITION ALSO REQUIRES:

Floor Plans (1 full size and 1 reduced to 11" x 17")

Site Plan showing location of project and adjoining structures and fences

Other (explain):

PLEASE NOTE: **YOUR APPLICATION CANNOT BE PROCESSED UNLESS BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED.**

5. DESCRIPTION OF PROJECT:

Describe all existing features that will be affected by proposed work. Please specify the condition of materials, design, and dimensions of each feature (additional pages may be attached)

Front porch deck - boards missing  
Sister floor joists - ends rotted  
Install 2 new columns - missing  
replace front steps - tree movement  
Replace skirting - rotting

Photo No. 101-111

Drawing No.

- B. Describe all proposed work, materials, design, dimensions and construction technique to be employed (additional pages may be attached)

Sister floor joists as needed  
Replace skirting with Azek  
Install 2 new matching columns  
Repair existing 2 columns  
Install new wood balustrade  
Install new wood steps

Photo No.

Drawing No. 001-005

6. SIGNATURE OF APPLICANT:

Dale M Dolence

Signature

DALE DOLENCE 3/9/12

Print or type name

Date

This form and all supporting documentation **MUST** arrive by 12:00 noon on the deadline date established to be considered at the next Historic Preservation Commission Meeting. Any information not provided to staff in advance of the meeting will not be considered by the Commission during their deliberation. Please call if you have any questions and staff will assist you.

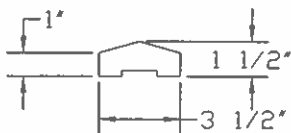
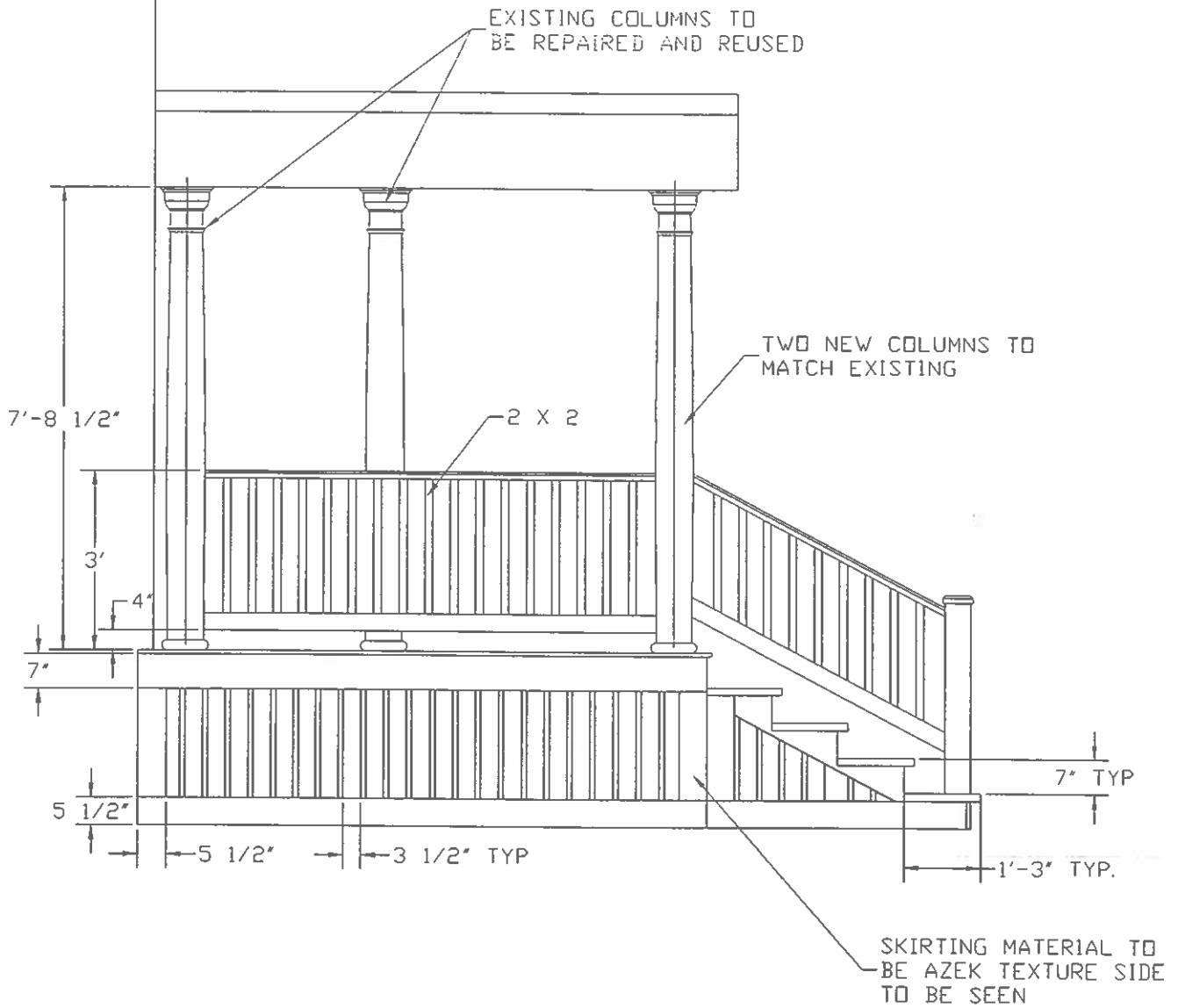
Hand Deliver or Mail Form to:  
Historic Preservation Commission  
City Clerk's Office  
200 E. Wells St. Room B-4  
Milwaukee, WI

PHONE: (414) 286-5722

FAX: (414) 286-3004

[www.milwaukee.gov/hpc](http://www.milwaukee.gov/hpc)

DALE DOLENCE  
926 N. 29TH ST.

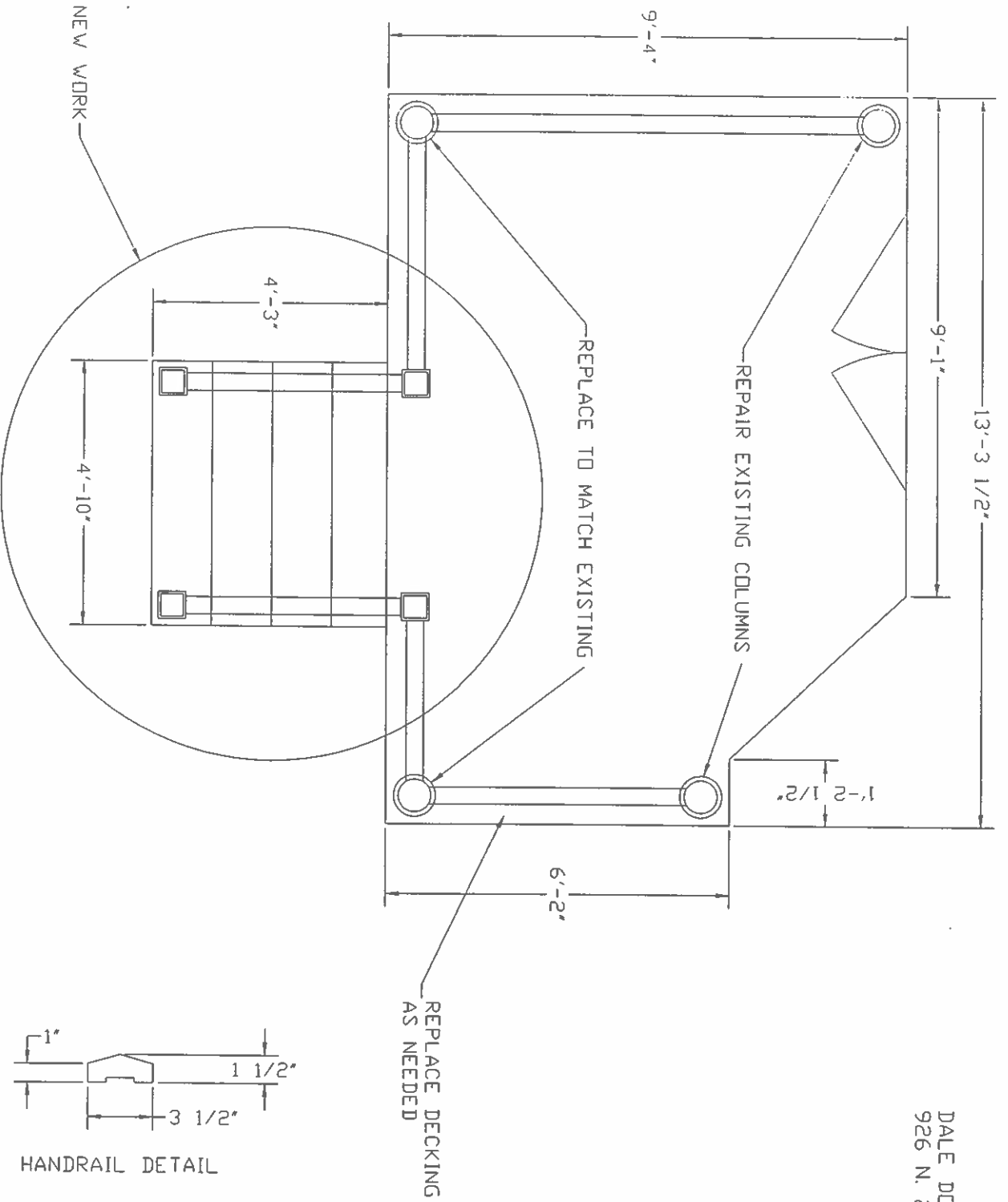


HANDRAIL DETAIL

NORTH ELEVATION

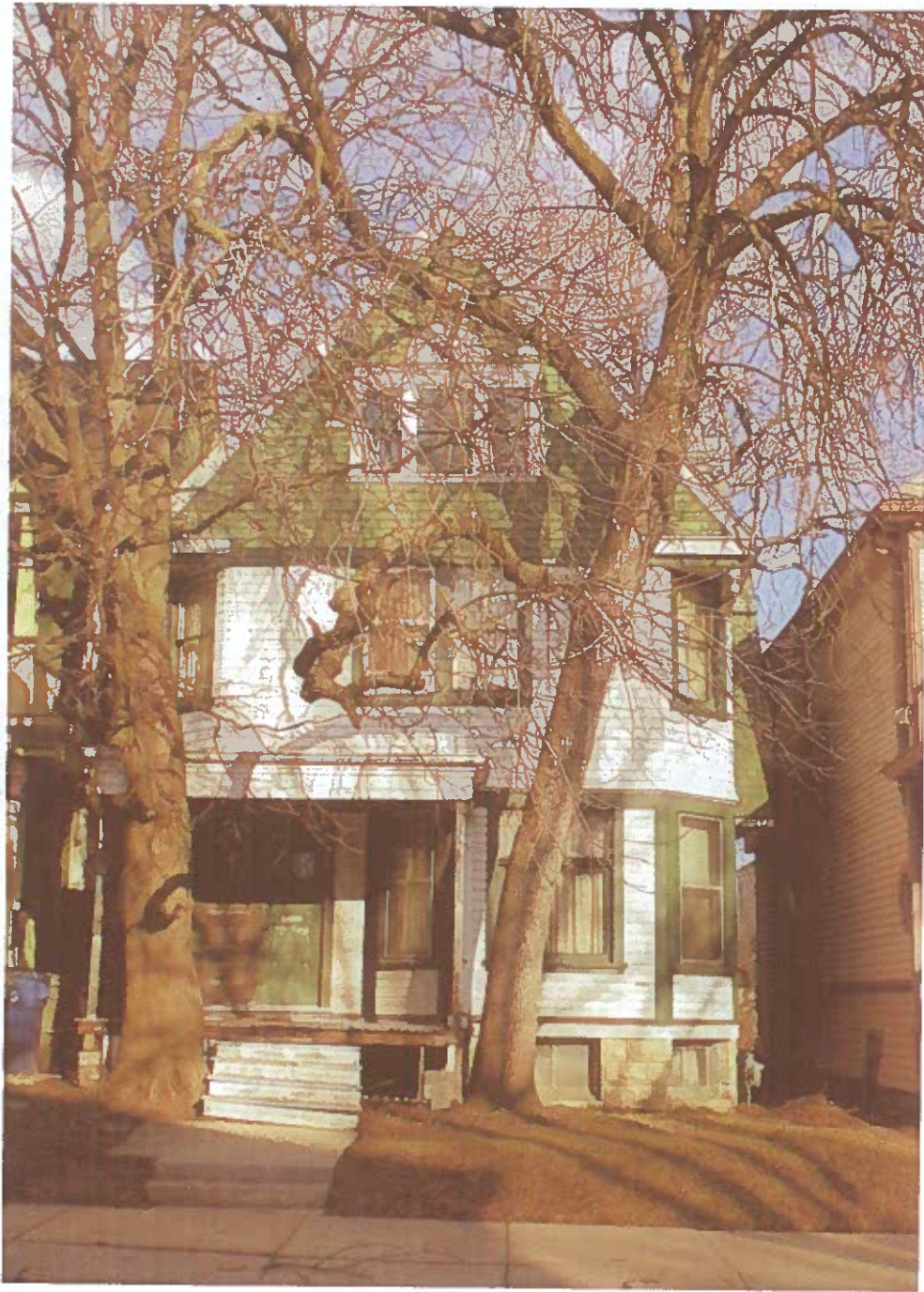
DWG. NO. 001

DALE DOLENCE  
926 N. 29TH ST.



PORCH PLAN





※101



※103



※102





※107



※105







※110



※109



※111

