

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

HISTO	ORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known)		
ADDR	RESS OF PROPERTY: 4 2010		
	The while house y		
NAME	E AND ADDRESS OF OWNER:		
Name	(s): Allison Meinharch		
Addre	ss: 2900 3 Kinnickinnic Ave		
City: _	111 Waukee State: W/ ZIP: 53207		
Email:	allisonneigharatagmail-con.		
Telepl	none number (area code & number) Daytime: Evening:		
	2 4/4-460-8695		
APPL	ICANT, AGENT OR CONTRACTOR: (if different from owner)		
Name	(s): David Holsteron		
Addre	D'IDECIAL OCA		
Audre			
City: _	MIWAY Rec State: ZIP Code: State:		
Email:			
Telepl	none number (area code & number) Daytime: 4/4-36 Evening: 4324		
ATTA at 414	CHMENTS: (Because projects can vary in size and scope, please call the HPC Office286-5712 for submittal requirements)		
Α.	REQUIRED FOR MAJOR PROJECTS:		
Photographs of affected areas & all sides of the building (annotated photos recommended)			
	Sketches and Elevation Drawings (1 full size and 1 reduced to 11" \times 17" or 8 $\frac{1}{2}$ " \times 11") A digital copy of the photos and drawings is also requested.		
	Material and Design Specifications (see next page)		
В.	NEW CONSTRUCTION ALSO REQUIRES:		
	Floor Plans (1 full size and 1 reduced to a maximum of 11" x 17")		
	Site Plan showing location of project and adjoining structures and fences		

PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS

<u>BOTH PAGES</u> OF THIS FORM ARE PROPERLY COMPLETED
AND SIGNED.

5. DESCRIPTION OF PROJECT:

Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached via email.

Emailing Photos

Via Email.

6.	SIGNATURE	OF APPLICANT
0.	SIGNATURE	OF APPLICANT:

Signature

Please print or type name

Date 8/19/19

This form and all supporting documentation MUST arrive by 4:00 pm (11:59 pm via email) 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.

Mail or Email Form to:

Historic Preservation Commission City Clerk's Office 841 N. Broadway, Rm. B1 Milwaukee, WI 53202

PHONE: (414) 286-5712 or 286-5722

hpc@milwaukee.gov

www.milwaukee.gov/hpc

Or click the SUBMIT button to automatically email this form for submission.