



**CERTIFICATE OF APPROPRIATENESS APPLICATION FORM**  
Incomplete applications will not be processed for Commission review.  
Please print legibly.

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

Grant Boulevard Historic District

**ADDRESS OF PROPERTY:**

2837 N. Grant Boulevard

**2. NAME AND ADDRESS OF OWNER:**

Name(s): City of Milwaukee, NIDC

Address: 809 N. Broadway

City: Milwaukee

State: WI

ZIP 53202

Email:

Telephone number (area code & number) Daytime: 414-286-8606

Evening:

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

Name(s): same

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)

XXXXX 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)

[Empty box for describing existing features]


Photo No. \_\_\_\_\_ Drawing No. \_\_\_\_\_

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

Completely renovate exterior of house. Repair built-in rain gutters. Install new dark gray, architectural shingles on pitched portion of roof. Install new membrane material on flat roofs. Remove front additions and restore front elevation to original configuration. Remove permastone exterior cladding, which was added later, and install new Portland cement stucco with a rough-cast finish to match original finish. Restore existing wood windows. Install new all-wood windows to match originals as needed. Restore existing stained glass windows on front elevation. Install new front wood door with Prairie style muntins. Raised brick foundation to be tuckpointed as needed. Foundation brick can be chemically cleaned if needed, but because it is presently painted it may be repainted.

Photo No. \_\_\_\_\_ Drawing No. \_\_\_\_\_

6. SIGNATURE OF APPLICANT:

  
Signature *N.I.D.C.*

*DICK H. HAAK* 6-3-11  
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)