



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)

Historic West Mitchell Street

ADDRESS OF PROPERTY:

815-817 West Historic Mitchell Street

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

Name(s): Hector Salinas

Address: 815-817 West Historic Mitchell Street

City: Milwaukee

State: WI

ZIP: _____

Email: elpaisanollc56@yahoo.com

Telephone number (area code & number) Daytime: 414.234.6226

Evening: same

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

Name(s): Keith Schultz

Address: 2515 North 66th Street

City: Wauwatosa

State: WI

ZIP Code: 53213

Email: swerk@juno.com

Telephone number (area code & number) Daytime: 414.322.7374

Evening: same

4. **ATTACHMENTS:** (Because projects can vary in size and scope, please call the HPC Office at 414-286-5712 for submittal requirements)

A. 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" x 17" or 8 1/2" x 11")

Material and Design Specifications (see next page)

B. 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 BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED AND SIGNED.

5. DESCRIPTION OF PROJECT:

Renovate North elevation of existing building. New brick and glazing and front doors

Empty rectangular box for project description details.

6. SIGNATURE OF APPLICANT:

Handwritten signature of Keith Schultz in blue ink.

Signature

Keith Schultz

Print or type name

5/6/2021

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 421/ 1

PHONE: (414) 286-5722

FAX: (414) 286-3994

www.milwaukee.gov/hpc

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

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