



# 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)

ADDRESS OF PROPERTY:

125 e LLOYD st.

2. NAME AND ADDRESS OF OWNER:

Name(s): Jose Maz

Address: PO Box 64047

City: Milwaukee State: WI ZIP: 53204

Email: mazgo\_dc@yahoo.com

Telephone number (area code & number) Daytime: 414 7360674 Evening:

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

Name(s):

Address:

City: State: ZIP Code:

Email:

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

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")  
A digital copy of the photos and drawings is also requested.

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:

- The Project consist in, to fix, replace or repair the original siding (see cedar) the same side, in the areas where is need. around window and doors, cover it with appropied Paint.

- At Est side, Remove a damage windo, instaled by the city contractor before I got the house and instal a double glass w/ pvc we energie efficient vinyl piano window with old spariece, (Instal a ~~sto~~ wood storm window to preserve the historic look if is required.)

- Repair ~~do~~ or replace wood trims around the exterior doors at the Est side.

6. SIGNATURE OF APPLICANT:

  
Signature

Jose Maz  
Please print or type name

10-17-18  
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.

**Mail or Email Form to:**  
Historic Preservation Commission  
City Clerk's Office  
841 N. Broadway, Rm. B1  
Milwaukee, WI 53202

PHONE: (414) 286-5722

[hpc@milwaukee.gov](mailto:hpc@milwaukee.gov)

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

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

**SUBMIT**