

LIVING WITH HISTORY

Certificate of Appropriateness

Milwaukee Historic Preservation Commission/809 N. Broadway/PO Box 324/Milwaukee, WI 53201-0324/414-286-5712

Property 28

Description of work Re

Repair wood garage soffits and fascia to match original. Install glass block windows in garage. 2808 N. SHERMAN BI

Repair front porch ornamental iron rails. Install new concrete steps for front porch. Install

new service walk.

Date issued

6/24/2010

PTS ID 66536 COA, exterior repairs

conditions apply to this certificate of appropriateness: issued a certificate of appropriateness for the work listed above. The work was found to be consistent with preservation guidelines. The following In accordance with the provisions of Section 308-81(9) of the Milwaukee Code of Ordinances, the Milwaukee Historic Preservation Commission has

correction orders or citations. If you require technical assistance, please contact Paul Jakubovich of the Historic Preservation staff as follows: Phone: (414) 286-5712 Fax: (414) 286-0232 E-mail: pjakub@milwaukee.gov. any changes or additions to this certificate before work begins. Work that is not completed in accordance with this certificate may be subject to All work must be done in a craftsman-like manner, and must be completed within one year of the date this certificate was issued. Staff must approve

If permits are required, you are responsible for obtaining them from the Milwaukee Development Center. It you have questions about permit requirements, please consult the Development Center's web site, www.mkedcd.org/build, or call (414) 286-8219, or 8211.

Paul Jakubovich

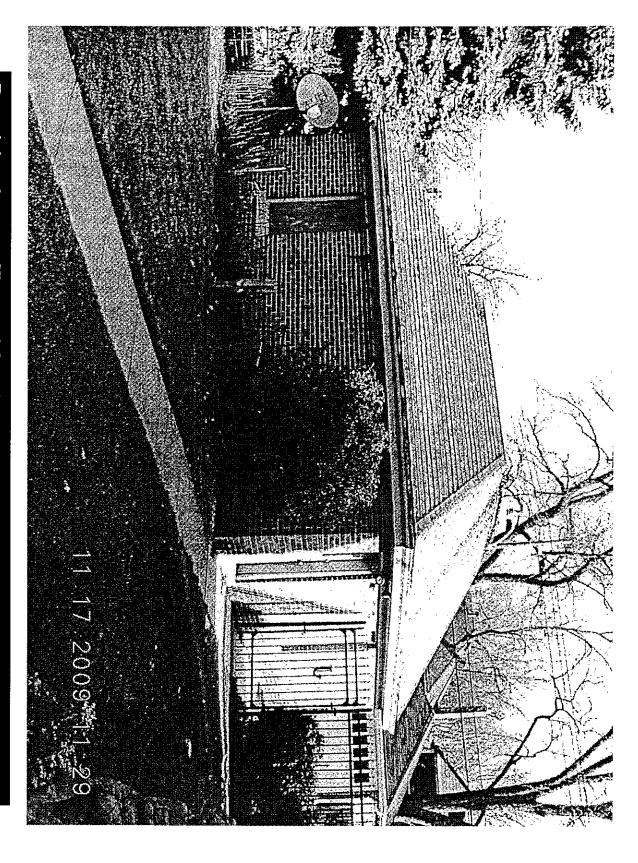
Copies to: Development Center, Ald. Willie Wade, Inspector Joel Walloch (286-8160)

City of Milwaukee Historic Preservation

Install new concrete steps and service walk

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Repair ornamental iron railing



Repair/replace soffits and fascia on garage to match original



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: 2808 N. Sherman Blvd
2.	NAME AND ADDRESS OF OWNER:
	Name(s): Ronald & Linda A. Jordan.
	Address: 2808 N. Sherman Blvd.
	city: Milwaucee State: WI. ZIP 53210
	Email:
	Telephone number (area code & number) Daytime: 414-241-8914 · Evening: 414-241-8914
3.	APPLICANT, AGENT OR CONTRACTOR: (if different from owner)
	Name(s): Hamid Sarlati
	Address: 809 N. Broadway.
	City: Millereckee State: WI. ZIP Code: 53202.
	Email: h Sarla & iniluar bee. 900.
	Email: h Sar a Similwa chee. 90 V. Telephone number (area code & number) Daytime: 414-286-5657. Evening:
.	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 ½" 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.

		09
City of Milwaukee: 2808 N. Sherman Blvd.		
	Hamid Sarlati	286-5657
	Loan Officer:	
"NIDC Addendum to Specifications," dated 7/9/09, 8/23/07 & 5/13/08, are incorporated into this scope by re	ference. These iter	ns provide an o
Standard Window Treatment: Any task that disturbs a previously painted surface shall be performed by pro	perly certified perso	nnel and
requires Milwaukee Health Department notification. Standard window treatment and window replacement s	hall be performed by	y properly
certified personnel and requires a Milwaukee Health Department permit.		
Miscellaneous: The contractor is responsible to field verify all measurements, the amount of materials need	ded, and the number	of windows
in the building. If any item in this scope calls for a certain manufacturer, model number, or approved equiva	lent of a particular i	tem, and that
item is to be substituted, both NIDC and the owner must approve the substitution in writing as a part of the o	contract.	
	Code	Cost Est
SITE		
Replace defective service walk as follows: south & north side approximately 280 sq.		
ft.	None	1,900
•		
GARAGE		
Repair all wood surfaces on the garage as needed, include soffits, fascia, etc.	None	320
Paint all the exterior wood surfaces	None	520
Install 4 glassblock windows for the garage	None	1,000
PORCHES		
Repair the front porch concrete edges to match existing	None	340
Repir front porch railing per code to match existing	PR	2,850
Saw cut the front porch (by front steps) and replace the front porch concrete steps per		
code	PR	380
HOUSE		
Install backflow preventer on hose faucet	PR	20
	None	1,500
Repair eaves and trim as needed		180
	ļ	910
		250
		3,200
		4,800
		400
20110 P 20110 20110 20110 2011 2011 2011		1
GENERAL INTERIOR		
	PR	80
FRONT BEDROOM - 1st Floor	<u> </u>	<u> </u>
	DR	100
	FN	100
	DE	250
icoded (permit)	PK	250
;	1	1
LIVING ROOM - 1st Floor		
	() Home Revised: 4/1/2010 () Work First inspection date: , 2009 Both the "Rehabilitation and Technical Specifications and Performance Standard for the City of Milwaukee "NIDC Addendum to Specifications," dated 7/9/09, 8/23/07 & 5/13/08, are incorporated into this scope by re of materials requirements & performance expectations. Updated copies can be obtained from NIDC @ 809 Standard Window Treatment: Any task that disturbs a previously painted surface shall be performed by proceedings Milwaukee Health Department notification. Standard window treatment and window replacement scertified personnel and requires a Milwaukee Health Department permit. Miscellaneous: The contractor is responsible to field verify all measurements, the amount of materials need in the building. If any item in this scope calls for a certain manufacturer, model number, or approved equivalents.	Rehab Special (

	SCOPE OF WORK	October 6th, 200	9
	City of Milwaukee: 2808 N. Sherman Blvd.		
34	DINING ROOM - 1st Floor		
35	Repair the three way switch	PR	120
36			
37	KITCHEN & PANTRY - 1st Floor	-	-
38	Repair defective switch for over the sink fixture	PR	80
	Install 20 amp circuit & closet (permit)	PR	100
	Install GFCi outlet(s) @ all existing within 6' of sink (permit)	PR	100
41			
	BATHROOM - 1st Floor		
	Install new vanity and faucet (owner will provide the fixture) (Permit)	PR	180
	Replace water closet (Permit)	PR	275
45	Topiass Hatel Gloset (Certific)		
	BATHROOM - 2nd Floor		
	Install GFCI in exisiting box (permit)	PR	100
	Replace lavatory trap and unclog the drain (permit)	PR	125
49	Treplace lavatory trap and unloog the drain (permit)	rr	120
	REAR BEDROOM - Northeast		
		DEN	0.40
$\frac{51}{52}$	Paint ceiling after repairing the crack	PbN	240
	REAR BEDROOM - Northwest		
		DEN	
	Repair the ceiling crack and paint	PbN	220
	Install outlet on north wall (permit)	PR	120
56	DEAD HALL 9 OTAIDO, 4st Florate December 1		
	REAR HALL & STAIRS: 1st Floor to Basement		
	Paint		380
59	Install vinyl tiles, first floor landing to basement, include lower step on the first floor		
	rear hailway	None	380
60			
	BASEMENT		
	Replace one boiler with high efficiency boiler (permit)	PR	2,800
	Install one 20 amp laundry circuit & outlet	PR	100
64	Remove (abate) asbestos	PR	1,800
		EST TOTAL	\$26,400
			-
PR	Program Requirement		
PbA	Lead Abatement Permit Required		
PbN	Lead Abatement Notification.		
None	Not required per program and/or code		
			· · ·
	Prepared by:	Date:	
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	Owner Approval:	Date:	
	and house account of the control of	,	

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3530 N. Palmer St. Milwaukee, WI 53212 (414) 263-4499 Fax (414) 263-4489

PROPOSAL SUBMITTED TO: LINDA + RON JORDAN	DATE 3/22/2010
2808 N. She-MAN BLVd.	PHONE 941-8914
Shi Lw. Wi. 53210	CONTACT & PHONE
Front Ponch No. Ls	OTHER: 37/-06 49

Licensed · Bonded · Insured

Place Online Aut Orner

Customer to Cot Bushes Back To Allow fon: Obs. Lay Obstonation est of Tops of Rails where Neccessary-North-entire Top; South 2 Sections. Replace with New charvel and Top Copy Scrape, who Brush, Prime with Rust Inthisting Primer, Primit with Industrial Quality Topcoot	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Costing Clastonation est of Tops of RAILS Where Neccessary-North-entine Top; South 2 Sections. Replace with New Chancel and Top Copp Scrape, Whe Brush, Prime with Rust Intlisiting Primer, Primit with Insoustriol Quality Topcout	Custome- to cot Bushes Backeto Allow fon:
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Scrape, Whe Brush, Prime with Rust INHisiting Primer, Primit with Insoustnice Quality Topcost	
Print with Insoustnice Quality Topcost	Scrape, Whe Brush, Prime with Rust 18History Primer
and the that I do so so	Private with Insoust nice Quality Topicant
Coppers motions + SHEBN 300	Complete Motions + TABON \$2850 00

We Propose hereby to furnish material and labor — complete in accordance with the above epecifications; for the sum of:			
		2	2002.00
Payable as follows:		do	illars (\$ 2000)
-	DEPOSIT		s / 435
	DUE UPON C	COMPLETION.	s/425
Child le	Feller	3/22/1	O This Proposal may be
Authorized Co. Rep		Cale	withdrawn by us is not

Co. Approval (Title)

All material is guaranteed to be as specified. All work to be completed in a workmantile manner according to standard practices. Any elteration or deviation from above, specificatione involving extra costs will be done only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tomado and other necessary insurance.

Additional Terms:

There are no warranties, expressed or implied, other than those herein stated. The installation of security devices does not guarantee inaccessibility to premises: contractor assumes no responsibility for any physical or monetary loss or damage to concrete or masonry that may occur, verbal representations made herewithin not withstanding.

Acceptance of Proposal:	The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

accepted within 202 days.

	<i></i>		
Signature (Tale)	Dete	Signawa (Yille)	Date



