



## 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)

Germania Building

**ADDRESS OF PROPERTY:**

135 W. Wells Street

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

Name(s): Germania Historic, LLC

Address: 901 S 70th Street

City: West Allis

State: WI

ZIP: 53214

Email: jreichl@cardinalcapital.us

Telephone number (area code & number) Daytime: 414-510-4256

Evening: Same

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

Name(s): Cardinal Capital Construction, LLC

Address: 901 S 70th Street

City: West Allis

State: WI

ZIP Code: 53214

Email: jreichl@cardinalcapital.us

Telephone number (area code & number) Daytime: 414-510-4256

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")  
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:

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

Complete repairs to the cornice roof extensions on three (3) sides of the building.

6. SIGNATURE OF APPLICANT:




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Signature

Jack Reichl  
 Please print or type name

11/23/21  
 Date

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

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

**SUBMIT**