



WISCONSIN
HISTORICAL
SOCIETY

RECEIVED
SEP 16 2019
BY: _____

HISTORIC HOMEOWNER'S INCOME TAX CREDIT APPLICATION

PART 1 – EVALUATION OF SIGNIFICANCE

AHI 30220

1. PROPERTY ADDRESS Street 2617 N WAHL AVE
City MILWAUKEE County MILWAUKEE ZIP 53211

Listed individually in the State Register or National Register. COMPLETE THIS PAGE ONLY
LISTING NAME _____

Located in a State Register or National Register historic district. COMPLETE THIS PAGE ONLY
NAME OF HISTORIC DISTRICT NORTH POINT NORTH

PRELIMINARY CERTIFICATION Not listed in State Register or National Register or located in a State Register or National Register historic district - COMPLETE BOTH PAGES

2. OWNER'S NAME GREGORY AND JOAN GNADT
Street 2617 N WAHL AVE
City MILWAUKEE State WI ZIP 53211 Telephone (days) 414 / 332-1571
Email address ignadt@wi.rr.com

3. PROJECT CONTACT JOAN THERESE GNADT
Email address ignadt@wi.rr.com Telephone (days) 414 / 332-1571

4. PHOTOGRAPHS Please enclose photographs of the exterior of the building to be rehabilitated. Photos should be in color, at least 4" x 6", commercially printed and clearly show all sides of the building.

5. OWNER'S CERTIFICATION I hereby attest that the information I have provided is, to the best of my knowledge, correct and that I own the property described above. I understand that the falsification of factual representations in the application may be subject to criminal sanctions.

SIGNATURE OF OWNER Joan Gnadt DATE 9/10/19

SEND COMPLETED APPLICATIONS TO State Historic Preservation Office
Wisconsin Historical Society – Room 312
816 State Street, Madison, WI 53706

STATE HISTORIC PRESERVATION OFFICE USE ONLY WHS PROJECT NO. WI 190340

The State Historic Preservation Office has reviewed this application and has determined that:

the property is listed in the State Register of Historic Places or National Register of Historic Places and is historic property for purposes of the Historic Homeowner's Income Tax Credit.

the property contributes to the above-named State Register or National Register historic district and is historic property for purposes of the Historic Homeowner's Income Tax Credit.

the property appears to meet the State Register or National Register Criteria for Evaluation and, therefore is determined to be historic property for purposes of the Historic Homeowner's Income Tax Credit.

NON-CERTIFICATION: the property is not listed in the State Register of Historic Places or National Register of Historic Places, is not a contributing element to a State Register historic district or National Register historic district, and does not appear to meet the State Register or National Register Criteria for Evaluation; therefore, the property is not a historic property for purposes of the Historic Homeowner's Income Tax Credit.

WHP
For Daina Penkiunas, State Historic Preservation Officer

26 SEPT 2019
Date



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HISTORIC HOMEOWNER'S INCOME TAX CREDIT APPLICATION
PART 2 – DESCRIPTION OF PROPOSED WORK

BY: _____

1. PROPERTY ADDRESS Street 2617 N WAHL AVE
City MILWAUKEE County MILWAUKEE ZIP 53211

2. OWNER'S NAME GREGORY AND JOAN GNADT
Street 2617 N WAHL AVE
City MILWAUKEE State WI ZIP 53211 Telephone (days) 414 / 332-1571
Email address jgnadt@wi.rr.com

3. PROJECT CONTACT JOAN THERESE GNADT
Email address jgnadt@wi.rr.com Telephone (days) 414 / 332-1571

4. OWNER'S CERTIFICATION I hereby attest that the information I have provided is, to the best of my knowledge, correct and that I own the property described above. I understand that the falsification of factual representations in the application may be subject to criminal sanctions. I further agree to submit the Request for Certification of Completed Work within 30 days of the date of completion of work or face forfeiture of any tax credit claimed for this project.

SIGNATURE OF OWNER [Signature] DATE 9/10/19

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Wisconsin Historical Society – Room 312
816 State Street, Madison, WI 53706

STATE HISTORIC PRESERVATION OFFICE USE ONLY

WHS PROJECT NO. WI 190340

The State Historic Preservation Office has reviewed this application for the above name property and has determined that:

the property is historic property and the rehabilitation as described meets the "Secretary of the Interior's Standards for Rehabilitation." This is a preliminary determination only. Final certification can be issued only after work has been completed and a Request for Certification of Completed Work has been approved.

the property is historic property and the rehabilitation will meet the "Secretary of the Interior's Standards for Rehabilitation" if the attached conditions are met. This is a preliminary determination only. Final certification can be issued only after work has been completed and a Request for Certification of Completed Work has been approved.

[Signature]
For Daina Penkiunas, State Historic Preservation Officer

26 SEP 2019
Date

NON-CERTIFICATION

THE OWNER MAY NOT CLAIM THE TAX CREDIT. The rehabilitation is not consistent with the historic character of the property and that the project does not meet the "Secretary of the Interior's Standards for Rehabilitation" for reasons given in the attached materials.
 THE OWNER MAY NOT CLAIM THE TAX CREDIT. The property has not been determined to be historic property for purposes of this program.

For Daina Penkiunas, State Historic Preservation Officer

Date



HISTORIC HOMEOWNER'S INCOME TAX CREDIT APPLICATION

PART 2 – DESCRIPTION OF PROPOSED WORK

5a. TAX CREDIT-ELIGIBLE WORK

Below is a list of common eligible work items. If you have a work item that is not on the list, please add it. Select the work for which you plan to claim the 25% tax credit.

Eligible Work	Specific Type				Estimated Cost	Start Date	Completion Date
<input type="checkbox"/> Doors	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Front/Rear	<input type="checkbox"/> Garage	\$		
<input type="checkbox"/> Chimney	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Chimney Cap	<input type="checkbox"/> Liner/Insert	\$		
<input type="checkbox"/> Electrical	<input type="checkbox"/> Repair	<input type="checkbox"/> Update	<input type="checkbox"/> New Service	<input type="checkbox"/> Wall Repair	\$		
<input type="checkbox"/> Foundation	<input type="checkbox"/> Repair	<input type="checkbox"/> Rebuild	<input type="checkbox"/> Waterproofing	<input type="checkbox"/> Drain Tile	\$		
<input type="checkbox"/> HVAC	<input type="checkbox"/> Boiler	<input type="checkbox"/> Furnace	<input type="checkbox"/> Water Heater	<input type="checkbox"/> AC	\$		
<input checked="" type="checkbox"/> Masonry	<input type="checkbox"/> 100%	<input checked="" type="checkbox"/> Partial			\$ 20,000		
<input checked="" type="checkbox"/> Painting	<input type="checkbox"/> House	<input checked="" type="checkbox"/> Trim	<input type="checkbox"/> Garage	<input type="checkbox"/> Outbuilding	\$ 2,000		
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Repair	<input type="checkbox"/> Update	<input type="checkbox"/> New Service	<input type="checkbox"/> Wall Repair	\$		
<input type="checkbox"/> Porch	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> New	<input type="checkbox"/> Steps	\$		
<input checked="" type="checkbox"/> Roof	<input checked="" type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input checked="" type="checkbox"/> Shingles	<input type="checkbox"/> Sheathing	\$ 14,000		
	<input type="checkbox"/> Gutters	<input type="checkbox"/> Downspouts	<input checked="" type="checkbox"/> Soffits	<input type="checkbox"/> Facia	\$		
<input type="checkbox"/> Siding	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Remove artificial		\$		
<input type="checkbox"/> Structural	<input type="checkbox"/> Columns	<input type="checkbox"/> Beams	<input type="checkbox"/> Joists	<input type="checkbox"/> Trusses	\$		
<input type="checkbox"/> Utilities	<input type="checkbox"/> Solar Panels	<input type="checkbox"/> Geo-thermal	<input type="checkbox"/> Well/Septic		\$		
<input type="checkbox"/> Windows	<input type="checkbox"/> Repair	<input type="checkbox"/> Replace	<input type="checkbox"/> Storm Windows	<input type="checkbox"/> Skylights	\$		
<input type="checkbox"/> Other					\$		
<input type="checkbox"/> Other					\$		
TOTAL COST					\$ 36,000		

5b. INELIGIBLE WORK

Below is a list of common ineligible work items. If you have a work item that is not on the list, please add it. ALL WORK MUST BE REVIEWED REGARDLESS OF ELIGIBILITY. Include work completed within the last year.

Ineligible Work	Specific Type				Estimated Cost	Start Date	Completion Date
<input type="checkbox"/> Driveway	<input type="checkbox"/> Repair	<input type="checkbox"/> New			\$		
<input type="checkbox"/> Fixtures	<input type="checkbox"/> Lighting	<input type="checkbox"/> Plumbing			\$		
<input type="checkbox"/> Insulation	<input type="checkbox"/> Wall	<input type="checkbox"/> Attic			\$		
<input type="checkbox"/> Interior	<input type="checkbox"/> Refinish	<input type="checkbox"/> Plaster Repair	<input type="checkbox"/> Paint		\$		
<input checked="" type="checkbox"/> Landscaping	<input type="checkbox"/> Patio	<input checked="" type="checkbox"/> Fencing	<input type="checkbox"/> Sidewalks		\$ 86,000	9/9/2019	12/15/19(e)
<input type="checkbox"/> New	<input type="checkbox"/> New Addition				\$		
<input type="checkbox"/> Remodeling	<input type="checkbox"/> Kitchen	<input type="checkbox"/> Bath	<input type="checkbox"/> Attic	<input type="checkbox"/> Basement	\$		
<input type="checkbox"/> Other					\$		
<input type="checkbox"/> Other					\$		
<input type="checkbox"/> Other					\$		
TOTAL COST					\$ 86,000		



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HISTORIC HOMEOWNER'S INCOME TAX CREDIT APPLICATION
PART 2 – DESCRIPTION OF PROPOSED WORK

7. INSTRUCTIONS Describe each item of your project and the materials and methods you propose

GNADT 2617 N WAHL AVE, MILWAUKEE

North Parapet Wall and Northwest Eave Repair

Remove existing slates from along the north parapet wall, and the northwest roof eave, saving sound slates for re-installation.

Remove the existing counter-flashings and step flashings from the south side of the parapet wall.

Remove the felt underlayment from the exposed roof areas and dispose of them.

Replace the damaged tongue-and-groove bead-board as needed from the northwest soffit

Prime and paint new bead-board to match existing paint.

Any rotted structural-framing wood will be replaced.

Install new Grace ice and water shield over the exposed roof areas.

Install new 43 lb. felt underlayment over the exposed roof areas.

The mortar joints on the inside (south facing side) of the parapet walls will be mechanically ground out and bricks will be checked for integrity. Any poor brick will be replaced with matching.

A test patch will be performed to match original color of mortar joints. All the newly tuckpointed joints will match the appearance of the approved test patch.

Tuckpoint mortar joints with type N mortar.

A new 3" copper band strip will be installed over every caulk joint in the parapet cap. This includes a reglet be cut on each side of caulk joint to accept new copper band. Reglets will then be caulked with polyurethane caulking.

Mechanically grind out mortar joints of the north parapet wall limestone caps (12 locations).

Tuckpoint north parapet wall limestone cap joints with type N mortar.

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Madison, WI 53706



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HISTORIC HOMEOWNER'S INCOME TAX CREDIT APPLICATION
PART 2 – DESCRIPTION OF PROPOSED WORK

7. INSTRUCTIONS Describe each item of your project and the materials and methods you propose

GNADT 2617 N WAHL AVENUE, MILWAUKEE

Upon completion of masonry work:

Re-install the original slates along the north parapet wall and northwest eave, with the appropriate length copper nails. Replace additional matching slates as needed.

Install new 16 oz copper step flashings and counter-flashings along the south side of the north parapet wall.

Seal new counter-flashings to masonry with colored urethane sealant.

Install new copper Berger Brother Pro snow guards along the northwest perimeter to limit/prevent avalanching snow.

Mechanically grind out and tuck-point, using type N mortar, all mortar joints on the north facing wall of the north parapet, from directly above the 2nd story windows, up to directly under the parapet wall limestone caps.

SEND COMPLETED APPLICATIONS TO

State Historic Preservation Office
Wisconsin Historical Society – Room 312
816 State Street
Madison, WI 53706



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September 26, 2019

Gregory and Joan Gnadl
2617 N. Wahl Avenue
Milwaukee, WI 53211

Re: Historic Preservation Certification Application
Project Number WI190340
Reviewed: **Conditionally Approved**

Dear Gregory and Joan Gnadl,

On 2019-09-16, the Division of Historic Preservation received a Historic Preservation Certification Application for your property at 2617 N. Wahl Avenue in Milwaukee. Enclosed is a copy of the signed Part 1 application indicating your house has been determined to be a historic property for purposes of this program.

We have reviewed the Part 2 application and determined the proposed project will meet the "Secretary of the Interior's Standards for Rehabilitation" **if the conditions on the following page are met**. Enclosed is a copy of the signed Part 2 application.

If questions arise during your project, we have many new articles about maintaining and preserving historic buildings that you may find useful: www.wisconsinhistory.org/preserve-your-building

When all work is completed, the project must be closed out in order to claim/retain tax credits.

1. Take photographs of the overall appearance of the house (from all four sides), as well as detailed "after" shots of the specific work that you have carried out. These photos should be printed in color and of a high resolution.
2. Send the photos to us along with the Request for Certification of Completed Work (attached).
3. A signed Certification of Completed Work will be required by the Department of Revenue to claim the tax credits.

If you have any questions I can be reached by mail at the Wisconsin Historical Society, by telephone at 608/264-6491, by fax at 608/264-6504, or by e-mail at mark.buechel@wisconsinhistory.org.

Please take our 3 minute customer service survey. Your feedback is important to us –
<http://bit.ly/SHPOsurvey>.

Sincerely,

Mark T. Buechel, AIA
Senior Preservation Architect



WISCONSIN
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ASSIGNED PROJECT CONDITIONS

Homeowner Copy

PROPERTY NAME: Catherine and Dr. James A. Bach House
PROJECT NUMBER: WI190340
2617 N. Wahl Avenue
Milwaukee

In order for your project to be approved for income tax credits the following conditions must be met. A second copy of these conditions are being provided for your contractor's use. It is the homeowner's responsibility that all conditions are met. Failure to meet these conditions results in project denial.

- 1. All flashing and counter flashing must step in mortar joints. masonry shall not be saw cut at an angle to install flashing or counter flashing. detailed photos showing the flashing and counter flashing step down the wall must be provided with the request for final certification to ensure compliance.**

 

Mark Buechel for Daina Penkiunas, State Historic Preservation Officer DATE



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ASSIGNED PROJECT CONDITIONS

Contractor Copy

PROPERTY NAME: Catherine and Dr. James A. Bach House
PROJECT NUMBER: WI190340
2617 N. Wahl Avenue
Milwaukee

In order for your project to be approved for income tax credits the following conditions must be met. A second copy of these conditions are being provided for your contractor's use. It is the homeowner's responsibility that all conditions are met. Failure to meet these conditions results in project denial.

1. All flashing and counter flashing must step in mortar joints. masonry shall not be saw cut at an angle to install flashing or counter flashing. detailed photos showing the flashing and counter flashing step down the wall must be provided with the request for final certification to ensure compliance.

26, SEPT 2019

Mark Buechel for Daina Penkiunas, State Historic Preservation Officer DATE