



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)

Sherman Park

ADDRESS OF PROPERTY:

3129 N Sherman Blvd, Milw WI 53216

2. NAME AND ADDRESS OF OWNER:

Name(s): Ms. Annette Dixon

Address: 3129 N Sherman Blvd / P.O. Box 142 53201

City: Milwaukee State: WI ZIP: 53216

Email: N/A

Telephone number (area code & number) Daytime: 414-530-7689 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

*Revised HPC
8/9/2022*

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.

TWO PICTURES.

1. I would like to have a parking slab poured in this area. Labeled 1+2.
26' x 21' slab
2. I would like to have the cracked Cement slabs in front of garage door replaced. Labeled 3+4
6'6" x 23' (approach)
3. I would like to replaced the cement that is cracked and buckled due to water replaced. Also have a 5' to 6' (chain link) high fenced placed here. To keep my neighbors from putting their trash cans in front of my garage as well as to stop the foot traffic. They exit their back door cut over to my. I want chain link so the police can see if someone is hiding.

6. SIGNATURE OF APPLICANT:



Signature

Ms. A. Dixon

Please print or type name

Labeled 4+5

8/6/22

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

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

SUBMIT



1

8/6/22, 2:04 PM

Photo - Google Photos



#2



3



#4



#5

HPC / Zidler Bldg.

3129 N Sherman Blvd

