

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

	RESS OF PROPERTY:		
2105	East Lafayette Place, Milwaukee, WI 5	3202	
NAM	E AND ADDRESS OF OWNER:		
Nam	e(s):Ashley & Michael Adam		
Addr	ess: 2105 East Lafayette Place		
City:	Milwaukee	State: WI	ZIP: 53202
Emai	l: ashleyannadam@gmail.com		
Teler	phone number (area code & numbe	r) Daytime: 608-358-9496	Evening: 608-358-9496
APP	LICANT, AGENT OR CONTRACTO	OR: (if different from owner)	
Nam	e(s):		
Addr	ess:		
City:		State:	ZIP Code:
Emai	l:		
Telep	phone number (area code & numbe	r) Daytime:	Evening:
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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.

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HVAC update project:

Part 1 - replace existing air handler and condenser in third floor attic closet and rooftop, inspecting existing supply and return ducting and adding additional supply and return ducting utilizing spaces out of visible sight including closet space, service stairwell, and laundry chute. See attachment P-28461-1 for additional details.

Part 2 - install new air conditioning system in third floor attic storage room, adding supply and return ducting utilizing spaces out of visible sight including closet space, service stairwell, and laundry chute. See attachment P-28461-2 for additional details.

Please see enclosed photo appendix for visual illustration of the above items.

Thank you!

Ashley & Michael

6.	SIGNA	TURE	OF A	APPI I	ICANT:
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Signature Signature

Ashley Adam	5/8/2023
Please print or type name	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.

