



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)

GARDEN HOMES NEIGHBORHOOD

ADDRESS OF PROPERTY:

4485 N. 26TH STREET, MILWAUKEE, WI 53209-6142

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

Name(s): LATRESA WILLIAMS

Address: 4033 N 18TH STREET

City: MILWAUKEE State: WI ZIP: 53209

Email: latresa23@gmail.com

Telephone number (area code & number) Daytime: 630-974-8774 Evening: 630-974-8774

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

Name(s): SAME AS OWNER

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

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.

I WOULD LIKE TO DEMOLISH THE GARAGE AND LEAVE THE CONCRETE SLAB. THE GARAGE IS LEANING, THE WOOD HAS ROTTED & THE ROOF HAS TO BE REPLACED. I'VE MET WITH NUMEROUS CONTRACTORS ON HOW TO REPAIR THE GARAGE AND ONCE THEY SEE THE GARAGE & WALK INSIDE THEIR PROFESSIONAL OPINION IS TO JUST SCRAP THE GARAGE. THE ATTACHED PICTURES SHOW THE CURRENT GARAGE CONDITION.

6. SIGNATURE OF APPLICANT:

Latrese Williams
Signature

LATRESIA WILLIAMS
Please print or type name

AUGUST 11, 2020
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