



## 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)

Miller High Life Theatre

ADDRESS OF PROPERTY:

500 W Kilbourn Ave; Milwaukee, WI 53203

2. NAME AND ADDRESS OF OWNER:

Name(s): Wisconsin Center District

Address: 400 W Wisconsin Ave

City: Milwaukee

State: WI

ZIP: 53203

Email: khopp@wcd.org

Telephone number (area code & number) Daytime: 414-908-6073

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 or 414-286-5722 for submittal requirements)

A. REQUIRED FOR MAJOR PROJECTS:

Digital photographs of affected areas & all sides of the building

Sketches and Elevation Drawings in PDF form. New construction, major storefront remodels, etc., must provide one set of D or E size drawings and sections

Material and Design Specifications (please attach)

B. NEW CONSTRUCTION ALSO REQUIRES:

Floor Plans (show fenestration and approximate wall locations, final floor plans are not required)

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.**

**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.

Removal of existing roof membrane in sections 6 and 8 on the Miller High Life Theatre. Address any unknown repairs that exist under the leaking EPDM roof membrane. Replace roof membrane in areas 6 & 8 on the Miller High Life Theatre. See attached description of work and product information.

Re-roof permit will be filed with the city via V F Roofing.

Material to be installed on the roof is an upgraded version of the same material on the existing roof.

**6. SIGNATURE OF APPLICANT (owner signature required for demolition):**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
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.

**Email Form to:** hpc@milwaukee.gov

Historic Preservation Commission  
841 N. Broadway, Rm. B1  
Milwaukee, WI 53202

**PHONE:** (414) 286-5712 or 286-5722

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

Or click the **SUBMIT** button to automatically email this form, if using an app such as Outlook or Apple Mail. The submit button does not work with web-based email interfaces.

**SUBMIT**



March 17, 2026

Karen Hopp  
Wisconsin Center District  
400 W Wisconsin Ave.  
Milwaukee, WI 53203

RE: Miller High Life Milwaukee Theatre Roof Replacement Roof Sections #8 and #6  
500 W Kilbourn Ave. Milwaukee, WI

Dear Karen,

Per your request we are pleased to submit the following proposal for the above referenced property.

- Furnish all labor and materials to remove the existing roof systems down to the existing light weight concrete with the resulting debris to be removed from the building and premises.
- Furnish all labor and materials to remove any wet or deteriorated light weight concrete at \$ Sq.ft. to be documented with pictures and measurements.
- Furnish all labor and materials to adhere down (1) layer of 1" polyisocyanurate board insulation.
- Furnish all labor and materials to install a new 60-mil EPDM membrane roof system following the most recent manufacturer specifications.
- Furnish all labor and materials to install new reinforced termination strip and 60-mil EPDM membrane to be used as flashings at all vertical surfaces.
- Furnish all labor and materials to fabricate and install new 24-gauge prefinished edge metal, matching the existing color as close as possible.

This work can be completed for the sum of

**The above scope of work will be completed following all OSHA guidelines.**

Thank you for the opportunity to provide the above proposal, if you have any additional questions, please feel free to contact me.

Respectfully,

A handwritten signature in black ink, appearing to read 'Richard Kircher', is written over a white background.

Richard Kircher  
Project Manager  
V & F Roof Consulting & Service  
262-522-3690 Office  
414-416-3697 Mobile  
262-522-3691 Fax  
[RKircher@vroofing.com](mailto:RKircher@vroofing.com)

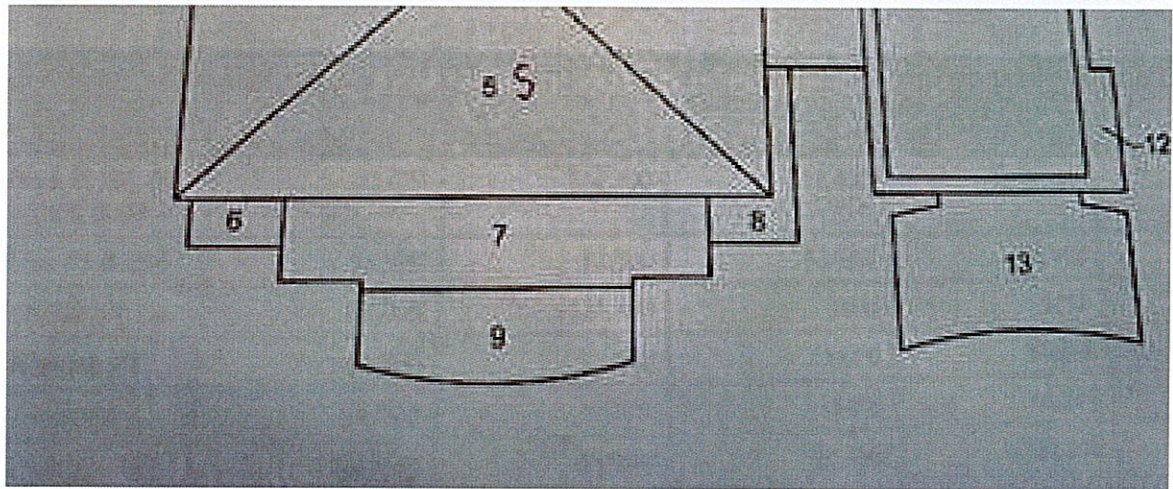
Accepted By: \_\_\_\_\_

Date: \_\_\_\_\_

W231 N2844 ROUNDY CIRCLE EAST PEWAUKEE, WI 53072  
262.522.3690 PHONE • 262-522-3691 FAX  
WWW.VFROOFING.COM

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Theatre Roof Section 6 & 8 3.23.26





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