

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) North Point South Historical District									
	ADDRESS OF PROPERTY 2135 North Lake Drive	Y:	e frank Etwanssission (**) en Maria bod vogs, franksissis nasirakun vogs e trafa et vik vogs k biskission e							
2.	NAME AND ADDRESS OF OWNER:									
	Name(s): Paula John									
	Address: 2123 E. Beverly Road									
	City: Shorewood	State: WI	ZIP: 53211							
	Email: PaulaJ217@gmail.com	TT was a before all residence and the address are the control of the months of the fill (Illinois) reseas, according to the construction as well as a construction of the control of the c	Application and a Contract field the Trib. Application and district the contract grant for an English and the Contract field th							
	Telephone number (area c	ode & number) Daytime: (414)202-4482	Evening: Same							
^	ADDITION ACENT OF	CONTRACTOR: /if different from ourner)								
3.	APPLICANT, AGENT OR CONTRACTOR: (if different from owner)									
	Name(s): Allan Francois (architect)									
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		State: WI								
	Email: acfdcm@aol.com									
	Telephone number (area co	ode & number) Daytime: (414)708-8332	Evening: Same							
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:									
	X Digital photographs of affected areas & all sides of the building									
	X 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									
	X 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 lo	ocation of project and adjoining structures	and fences							
	PLEASE NOTE: Y	OUR 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.

Alterations to the exiting garage to increase garage door with and height from 8' x 6' to 9' x 7'. Eliminate stucco exterior wall finish and install brick veneer masonry to match existing home brick and masonry detail. Install wrought iron railings to match existing railings between masonry piers and corner columns. New railings shall have 4" maximum opacity per code. garage doors shall be CHI carriage overlay, type 30, in white color with single square top seeded glass lites and wrought iron hardware. New rear door stairs/landing shall be concrete to replicate exposed limestone foundation walls. stair/landing shall have wrought iron railing and handrail. Drawings 1 of 4 thru 4 of 4 are attached reflecting proposed alterations.

MT (owner signature required for demolition):

Please print or type name

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:

6.

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

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.



2020

CARRIAGE

COLLECTION



C.H.I.

The Quality Garage Door."

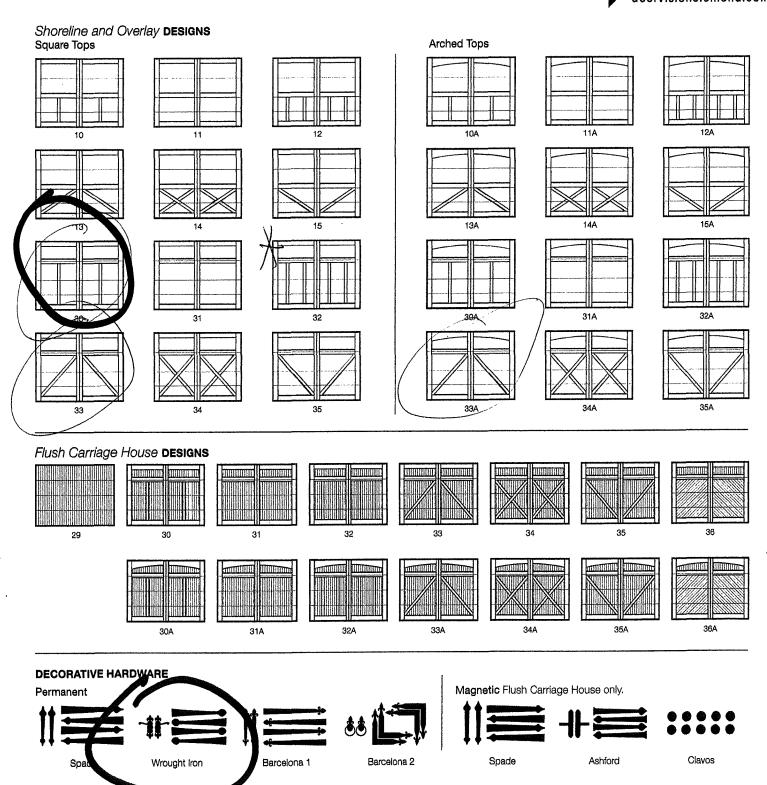
| PERSONALIZING OPTIONS

We offer a variety of personalizing options to help your home stand out in your neighborhood. After choosing your door's style and color, add glass, window designs, or hardware to dramatically change the overall look of your door and add to your home's appeal.

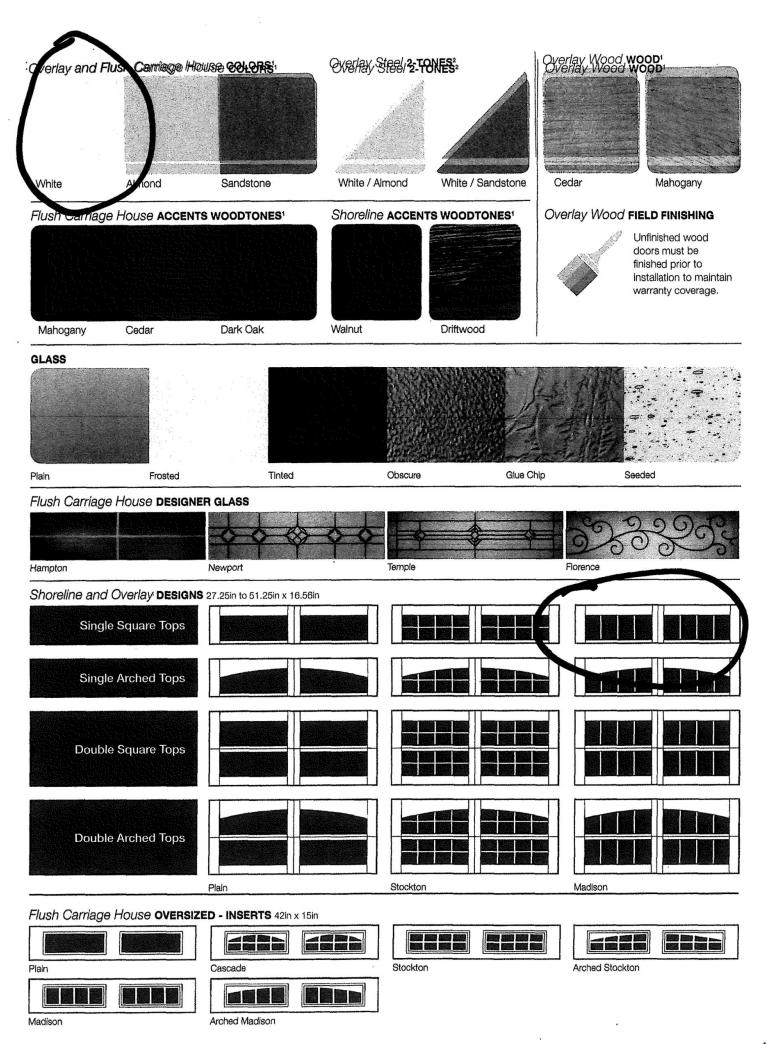
DoorVisions

See your door before you buy it!

doorvisions.chiohd.com

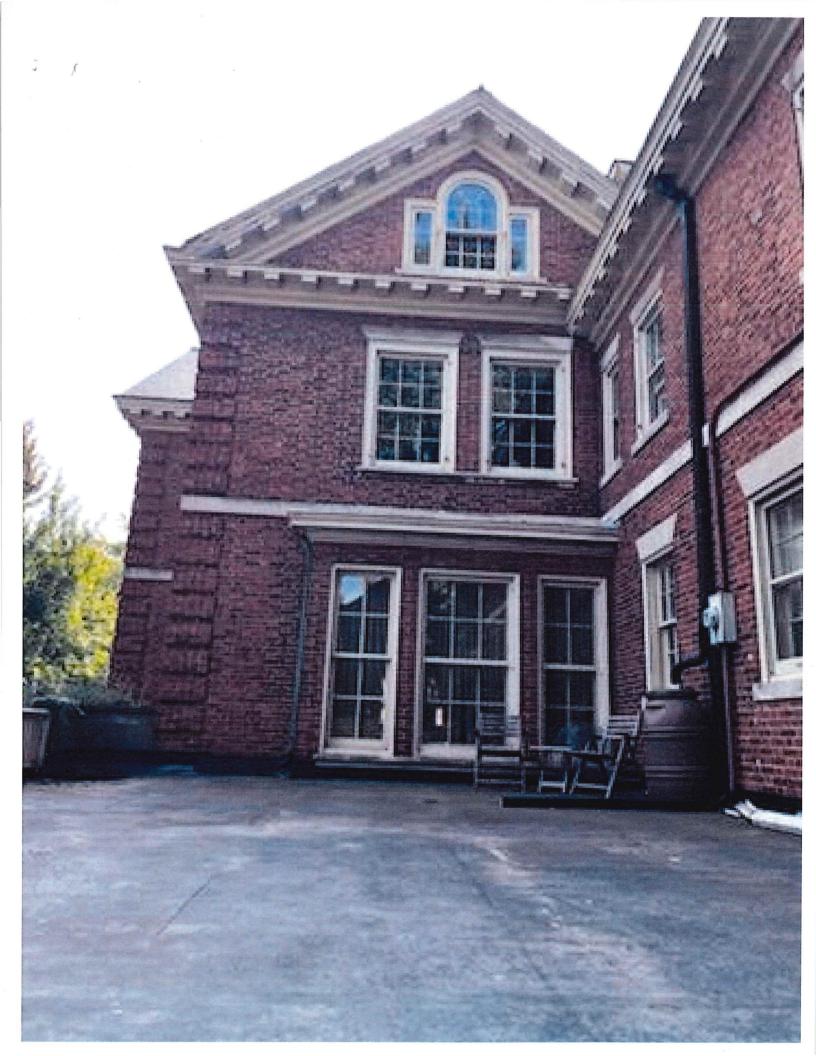


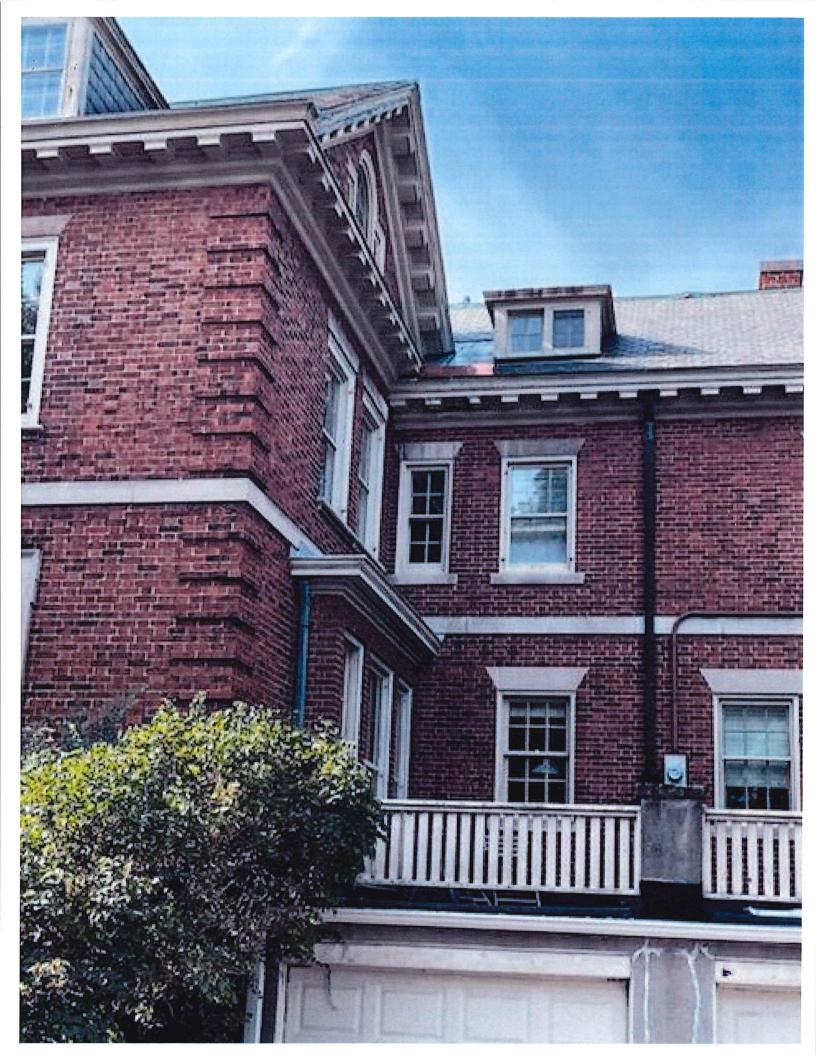
¹ Refer to your local C.H.I. Dealer for exact color, woodtones, and woodtype match. 2 Overlay face boards are always white for a 2-tone design.



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Plan Examination Application

Permit & Development Center 809 N. Broadway, Milwaukee, WI 53202 (414) 286-8210 milwaukee.gov/permits DevelopmentCenterInfo@milwaukee.gov									
Plan Exam Requested (ch	eck all that a	apply)						-Aau	
☐ Commercial ☐ One/Two-Fam☐ Parking Lot ☐ Footing Foundate	tion HV	AC Plan Eros	ne نے sion con	trol	plan DSi	lormw	ater Mana	Alteration gement Pla	
Location (exact street address)	House # OK_		Total SF	~	\	Con	Cost struction	Job Cost HVAC	
Contact Name (check primary contact)	Address	s/City/State/Zip				Phone/Fax/Email			
Occupant / Tenant									
					 				
A			0					1121	
Building Owner	212	3 En Bewy	Kosh			144 202-4484			
Kanla John	Shov	Shorewood, WI 53211				这	12 LAD	10GNAIL	
Design Professional	1300	5 GYEMOOV	DVW			K	A 103-	3332	
Dan C. Francois	_ Elm	Elm Grow W1 53/22				Ă	FIXM	e Xolico	
Contractor									
					 		 		
1 set for Planning review 1 set for Health Dept. review Letter of supervision 1 copy specifications 1 copy structural calculations State energy conservation forms	aterials to be Submitted at of survey scape drawings atrol plan/worksheet/deposit or management plan y analysis (COMM 69) plan			HVAC Plan Review 4 sets HVAC plans Letter of supervision 1 set architectural plans (if not submitted concurrently) 1 copy HVAC specifications 1 copy HVAC calculations (stamped and sealed) COMM 63 "H" sheets Plan examination Fees					
Comments		Constructi			on \$				
					Erosion \$				
					HVAC Stormwater	ter \$			
					Otorinwater		Ψ		
Approvals		Routing		Se	ent		Received		
☐ BOZA required		Customer self-routing	g						
☐ SAC requires		DPW							
☐ Asbestos permit required	Planned Developmen	nt							
Historic approval required	Redevelopment								
Renewal district		Overlay district							
Overlay district		Health							
☐ Flood plain☐ Condemnation orders		Plan examiner							
Other	Permit fee								



Certificate of Supervision

Permit & Development Center
809 N. Broadway, Milwaukee, WI 53202 (414) 286-8211 milwaukee.gov/permits DevelopmentCenterInfo@milwaukee.gov
Premise address: 2135 N. Lake Mk
I hereby certify that I am a Registered Architect, Registered Professional Engineer, or Designer of Engineering Systems, in accordance with Chapter 443 of the current Wisconsin Statutes.
I further certify that I have been retained as the supervising professional for the performance of the supervision of reasonable on-the-site observations to determine if the construction is in substantial compliance with the approved plans and specifications as required by Section SPS
361.40 of the Wisconsin Administrative Code and s. 200-27 of the City of Milwaukee Code of Ordinances. Upon completion of construction, I will file a Certificate of Compliance with the City of Milwaukee certifying that, to the best of my knowledge and belief, construction has or has not been performed in substantial compliance with the approved plans and specifications. In the event that I am no longer associated with this project I will file a Certificate of Compliance notifying the City of Milwaukee as such and indicating the current status of compliance.
This certificate is for supervision of: Building or structural design Heating, ventilating and air conditioning design Energy conservation design Other:
Signature of architect, engineer or designer:
Printed name: Am C, Francois
Address: 13005 GVKMOOV DVKK, Elm Grove, WS 53122
Registration number: 476
Telephone number: 4332
Email address: XCFDCM Q AOL, LOM
Date: 9/6/10/10