



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)

Brewers Hill Historic District

ADDRESS OF PROPERTY:

1820 North 1st Street

2. NAME AND ADDRESS OF OWNER:

Name(s): Donald Barnes

Address: 1820 North 1st Street

City: Milwaukee

State: WI

ZIP: 53212

Email: _____

Telephone number (area code & number) Daytime: 414-264-0213

Evening: _____

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

Name(s): Ryan Shortridge

Address: 124 West Vine Street

City: Milwaukee

State: WI

ZIP Code: 53212

Email: ryanhenryshortridge@gmail.com

Telephone number (area code & number) Daytime: 651-261-5773

Evening: 651-261-5773

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.

Construction of new one car garage with adjacent asphalt parking area for 3 cars. New Lannon Stone or similar drystacked retaining wall with poured concrete steps. Please see drawings for dimensions and details.

6. SIGNATURE OF APPLICANT:

Signature

Ryan Shortridge _____

Please print or type name

8/1/2018 _____

Date

This form and all supporting documentation **MUST** arrive by 12:00 noon 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) 286-5722

hpc@milwaukee.gov

www.milwaukee.gov/hpc

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

SUBMIT