

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known) ADDRESS OF PROPERTY: 124 W Vine St. NAME AND ADDRESS OF OWNER: 2. Ryan and Alexandra Shortridge
124 W Vine St Name(s): Address: Milwaukee State: City: Email: Telephone number (area code & number) Daytime: (651) 261-577 Rening APPLICANT, AGENT OR CONTRACTOR: (if different from owner) 3. D+ll Heating and A/C License#4246
4227 S 13+h St Name(s): Address: Milwaukee state: WI dandmheating@sbcglobalinet City: ZIP Code: 5326 Email: Telephone number (area code & number) Daytime: (4)4) 281-5350 Evening: ATTACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4. 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")

PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS
BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED
AND SIGNED.

Site Plan showing location of project and adjoining structures and fences