



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)

Humphrey Scottish Rite Masonic Center

ADDRESS OF PROPERTY:

790 N. Van Buren Street

2. NAME AND ADDRESS OF OWNER:

Name(s): AH Masonic, LLC

Address: c/o Ascendant Holdings, LLC ATTN: Eric Nordeen, 324 E Wisconsin Ave, Suite 1010

City: Milwaukee State: WI ZIP: 53202

Email: eric@ascendant-holdings.com

Telephone number (area code & number) Daytime: 414-299-4880 Evening: 414-299-4880

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

Name(s): Ramlow/Stein, Inc., Attn: Scott Ramlow

Address: 322 E. Michigan Street, #400

City: Milwaukee State: WI ZIP Code: 53202

Email: scottr@ramlowstein.com

Telephone number (area code & number) Daytime: 414-271-8899 Evening: 414-271-8899

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.

The proposed project is an adaptive reuse of the Humphrey Scottish Rite Masonic Center to become 22-to-25, two and three bedroom apartments, ranging from 1,500 to 2,500 square feet each. The conversion will not require additional stories or major changes to the exterior of the building. Due to the limited size of window openings and the required depth for apartments in the building maximum natural light is needed from all windows.

We are requesting approval to remove (20) existing stained glass windows as identified on the enclosed drawings. Prior to removal all windows will be professionally photographed.

6. SIGNATURE OF APPLICANT:



Signature

Scott Ramlow, AIA

02/04/2021

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.

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