

LIVING WITH HISTORY

Certificate of Appropriateness

Milwaukee Historic Preservation Commission/809 N. Broadway/PO Box 324/Milwaukee, WI 53201-0324/414-286-5712

Property Description of work

937 N. 33RD ST.

Install new standing seam, copper roof on tower and rebuild curved, built-in gutter system to

match original.

6/18/2010

Date issued

. PTS ID 60780 COA, metal roof on tower

conditions apply to this certificate of appropriateness: issued a certificate of appropriateness for the work listed above. The work was found to be consistent with preservation guidelines. The following In accordance with the provisions of Section 308-81(9) of the Milwaukee Code of Ordinances, the Milwaukee Historic Preservation Commission has

No other features will be removed or altered. Existing metal shingles on tower will be removed

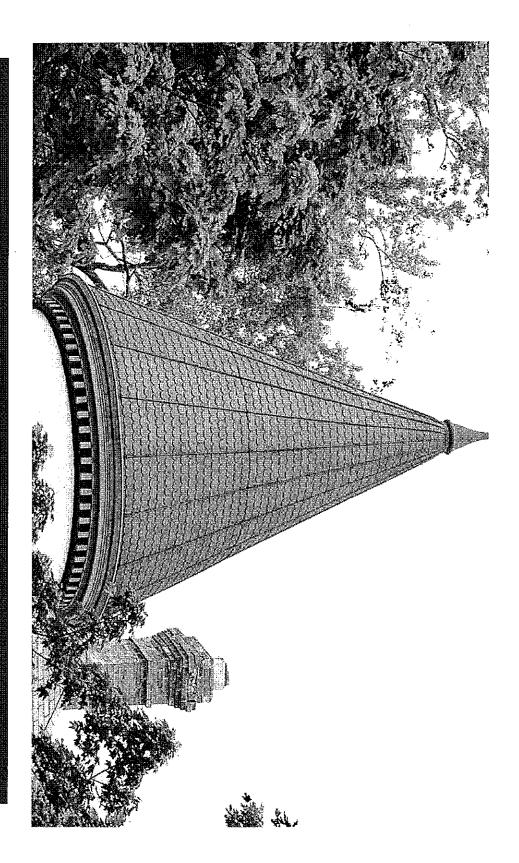
correction orders or citations. If you require technical assistance, please contact Paul Jakubovich of the Historic Preservation staff as follows: Phone any changes or additions to this certificate before work begins. Work that is not completed in accordance with this certificate may be subject to All work must be done in a craftsman-like manner, and must be completed within one year of the date this certificate was issued. Staff must approve (414) 286-5712 Fax: (414) 286-0232 E-mail: pjakub@milwaukee.gov.

If permits are required, you are responsible for obtaining them from the Milwaukee Development Center. If you have questions about permit requirements, please consult the Development Center's web site, www.mkedcd.org/build, or call (414) 286-8370 or 8211.

Paul Jakubovich

City of Milwaukee Historic Preservation

Copies to: Development Center, Ald. Willie Hines, Inspector Joel Walloch (286-8160)



Tower roof to be recovered in standing seam copper. Number of seams to match existing. Final to be salvaged and reinstalled or duplicated if at all possible.



CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

1.	Mortin L. Sohultz House				
	ADDRESS OF PROPERTY: 937 1, 331 S.				
2.	NAME AND ADDRESS OF OWNER:				
	Name(s): Susan & Howard Anstedt				
	Address: 9371.331d51				
	City: Milwautre State: WI. ZIP 53208				
	Email: hanstedt 1 @ wirr.com				
	Telephone number (area code & number) Daytime: 414 - 344 - 083 6 Evening:				
3.	ADDITION OF CONTRACTOR OF STATE OF CONTRACTOR				
	APPLICANT, AGENT OR CONTRACTOR: (if different from owner)				
	Name(s):				
	Address:				
	City: State: ZIP Code:				
	Telephone number (area code & number) Daytime: Evening:				
4.	ATTACHMENTS				
	A. REQUIRED FOR ALL PROJECTS:				
	Photographs of affected areas & all sides of the building (annotated photos recommended)				
	Sketches and Elevation Drawings (1 full size and 2 reduced to 11" x 17" or 8 ½" x 11")				
	Material and Design Specifications (see next page)				
	B. NEW CONSTRUCTION/DEMOLITION ALSO REQUIRES:				
	Floor Plans (1 full size and 1 reduced to 11" x 17")				
	Site Plan showing location of project and adjoining structures and fences				
	Other (explain)				
	Section 11 distance with a section of the section o				

PLEASE NOTE:

YOUR APPLICATION CANNOT BE PROCESSED UNLESS BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED.

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5	DESI	CRIPTION	
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<u>Describe all existing features</u> that will be affected by proposed work. Please specify the condition of materials, design, and dimensions of each feature (additional pages may be attached)				
Turret roof. Origanal metal will be take off. The roof is badly rusted. It is a 16 standing Seam roof with 8 is his Seale metal pattern.				
Photo No. 12 Drawing No.				
Describe all proposed work, materials, design, dimensions and construction technique to be employed (additional pages may be attached)				
Will be replaced by astonding seam copper roof with 16 seams that match existing seams				
Photo No. 13> Drawing No.				
Signature OF APPLICANT: Signature				
Susan Anstedt Print or type name C-13-10 Date				
m and all supporting documentation MUST arrive by 12:00 noon on the deadline date established to be red at the next Historic Preservation Commission Meeting. Any information not provided to staff in e of the meeting will not be considered by the Commission during their deliberation. Please call if you y questions and staff will assist you.				

This form and al considered at th advance of the have any questi

Hand Deliver Form to: Historic Preservation Division Department of City Development 809 North Broadway - 1st Floor Milwaukee, WI

or

Mail Form to: Historic Preservation Division Department of City Development 1st floor Milwaukee, WI 53202-3617

PHONE: 414.286-5722

FAX: 414. 286-0232

www.mkedcd.org/planning/historic

6.



May 26, 2010

Howard J. and Susan B. Anstedt 937 North 33rd Street Milwaukee, WI 53208

Re: Historic Preservation Certification Application

Project Number wi09e063

Dear Howard and Susan:

On April 20, 2010, we received from you a request to amend your tax credit project, number wi09e063. The purpose of the amendment was to modify the treatment for the turret to install standing seam metal roof with 16 seams that match the existing seams but not install the metal fish scale shingles due to lack of product availability.

Your request for amendment meets the Secretary of the Interior's Standards for Rehabilitation. The additional work is hereby approved and has been added to the list of eligible work.

If you have any questions about this approval, please let me know. I can be reached by mail at the Wisconsin Historical Society, by telephone at 608/264-6491, by fax at 608/264-6504, or by e-mail at mark.buechel@wisconsinhistory.org.

Sincerely.

Mark Buechel, AIA

Senior Preservation Architect

