



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)

COLD SPRING PARK

ADDRESS OF PROPERTY:

3102 W. MCKINLEY BLVD.

2. NAME AND ADDRESS OF OWNER:

Name(s): JOHN AND MARILYN BYRD

Address: 3102 W. MCKINLEY BLVD

City: MILWAUKEE State: WI ZIP: 53208-2954

Email: BYRD6537@SBCGLOBAL.NET

Telephone number (area code & number) Daytime: (414) 933-8925 Evening: 933-8925 (414)

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

Name(s):

Address: N/A

City: N/A State: N/A ZIP Code: N/A

Email: N/A

Telephone number (area code & number) Daytime: Evening: N/A

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:

X 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

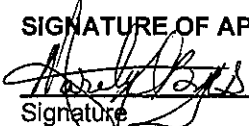
PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED AND SIGNED.

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.

REMOVE EXISTING CONCRETE STAIRS AND SIDEWALK SLABS TO DIG OUT NINE FEET OF CREAM CITY CRUMBLED FOUNDATION BRICK, FORM UP AND POUR A NEW 8 INCH X 24 INCH WIDE FOOTING WITH HALF INCH REBAR INSTALLED BOTH HORIZONTALLY AND VERTICAL FOR NEW BLOCK RELAY 12 INCH BLOCK FOR NEW FOUNDATION UP TO GRADE HEIGHT. CLEAN AND RELAY EXISTING BRICK BACK ON HOUSE, FILL THE BLOCK CORES WITH CEMENT AND MAKE SURE THERE IS REBAR IN EVERY THIRD BLOCK VERTICALLY TO STRENGTHEN THE WALL. PERMITS WILL BE PULLED BY INDUSTRIAL RESTORATION.

6. SIGNATURE OF APPLICANT:


Signature

MARILYN BYRD
Please print or type name

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.

Hand Deliver or Mail Form to:
Historic Preservation Commission
City Clerk's Office
200 E. Wells St. Room B-4
Milwaukee, WI 53202

PHONE: (414) 286-5722

FAX: (414) 286-3004

www.milwaukee.gov/hpc

SUBMIT