

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

ADDRESS OF PROPERTY	V.	1505 P Holst Placed National/Coard
ADDRESS OF PROPERT	2651 N. GrANT BI	vd. Milwaukee WI 53210
NAME AND ADDRESS OF		
	C. Dukes Bevin F. C	Thristia
Address: 2651 N		
	State: WT	710 530 W
- " radukes"	2001@ yahoo.com be	ZIP: 33040
	9	120
Telephone number (area co	ode & number) Daytime (7/5) 305-3	576 6 Evening: (4/4) 232 -3652
ADDI ICANT AGENT OD	2011774.0707	
	CONTRACTOR: (if different from own	er)
Name(s): SAME 45.	ABONE	
Address:		
City:	State:	ZIP Code:
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Email: Telephone number (area co ATTACHMENTS: (Becaus at 414-286-5712 or 414-286	ode & number) Daytime: e projects can vary in size and scope, 6-5722 for submittal requirements)	Evening:
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ATTACHMENTS: (Becaus at 414-286-5712 or 414-286 A. REQUIRED FOR M. Digital photographs Sketches and Eleva must provide one se	ode & number) Daytime: e projects can vary in size and scope, 6-5722 for submittal requirements) IAJOR PROJECTS: of affected areas & all sides of the buition Drawings in PDF form. New const	Evening: please call the HPC Office Iding truction, major storefront remodels, etc.
Email: Telephone number (area controller) ATTACHMENTS: (Becaus at 414-286-5712 or 414-286) A. REQUIRED FOR Modern Digital photographs Sketches and Eleva must provide one see Material and Design	e projects can vary in size and scope, 6-5722 for submittal requirements) IAJOR PROJECTS: of affected areas & all sides of the builtion Drawings in PDF form. New consist of D or E size drawings and sections	Evening: please call the HPC Office Iding truction, major storefront remodels, etc.
Email: Telephone number (area control of the contr	e projects can vary in size and scope, 6-5722 for submittal requirements) IAJOR PROJECTS: of affected areas & all sides of the builtion Drawings in PDF form. New constat of D or E size drawings and sections Specifications (please attach) ION ALSO REQUIRES:	Evening: please call the HPC Office Iding truction, major storefront remodels, etc.

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

5. **DESCRIPTION OF PROJECT:**

ell us what you want to do. Describe all proposed work including materials, design, nd dimensions. Additional pages may be attached via email.							
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6. SIGNATURE OF APPLICANT (owner signature required for demolition):

Signature

RODNEY C. Dules

Please print or type name

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.

Email Form to:

hpc@milwaukee.gov

Historic Preservation Commission 841 N. Broadway, Rm. B1 Milwaukee, WI 53202

PHONE: (414) 286-5712 or 286-5722

www.milwaukee.gov/hpc

Or click the SUBMIT button to automatically email this form, if using an app such as Outlook or Apple Mail. The submit button does not work with web-based email interfaces.

SUBMIT