



# 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)

*Vemmer House*

**ADDRESS OF PROPERTY:**

2359 N. Wahl Ave, Milwaukee, WI 53211

2. **NAME AND ADDRESS OF OWNER:**

Name(s): Matthew and Molly Lueder

Address: 2359 N. Wahl Ave

City: Milwaukee

State: WI

ZIP: 53211

Email: mjlueder@gmail.com

Telephone number (area code & number) Daytime: 414-403-3368

Evening:

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

Name(s): Bob Diel - LaRosa Landscape Company

Address: N144 W5800 Pioneer Rd

City: Cedarburg

State: WI

ZIP Code: 53012

Email:

Telephone number (area code & number) Daytime: 262-375-8900

Evening:

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.

Landscaping Project: Build Valders Limestone retaining wall in front of property to replace existing retaining wall that is falling over. Install Bluestone walkway from Driveway to front steps. Landscape plantings consisting of Boxwood, Bobo Hydrangea, Serviceberry and Bevan's Variety Geranium.

Pictures will be sent in a follow-up email due to size.

**6. SIGNATURE OF APPLICANT:**

  
\_\_\_\_\_  
Signature

Matthew Lueder  
Please print or type name

7/6/2020  
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](mailto:hpc@milwaukee.gov)

[www.milwaukee.gov/hpc](http://www.milwaukee.gov/hpc)

Or click the **SUBMIT** button to automatically email this form for submission.

**SUBMIT**