



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)

ADDRESS OF PROPERTY:

2. NAME AND ADDRESS OF OWNER:

Name(s): _____

Address: _____

City: _____ State: _____ ZIP: _____

Email: _____

Telephone number (area code & number) Daytime: _____ Evening: _____

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

Name(s): _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Email: _____

Telephone number (area code & number) Daytime: _____ 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.

6. SIGNATURE OF APPLICANT:

Signature

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.

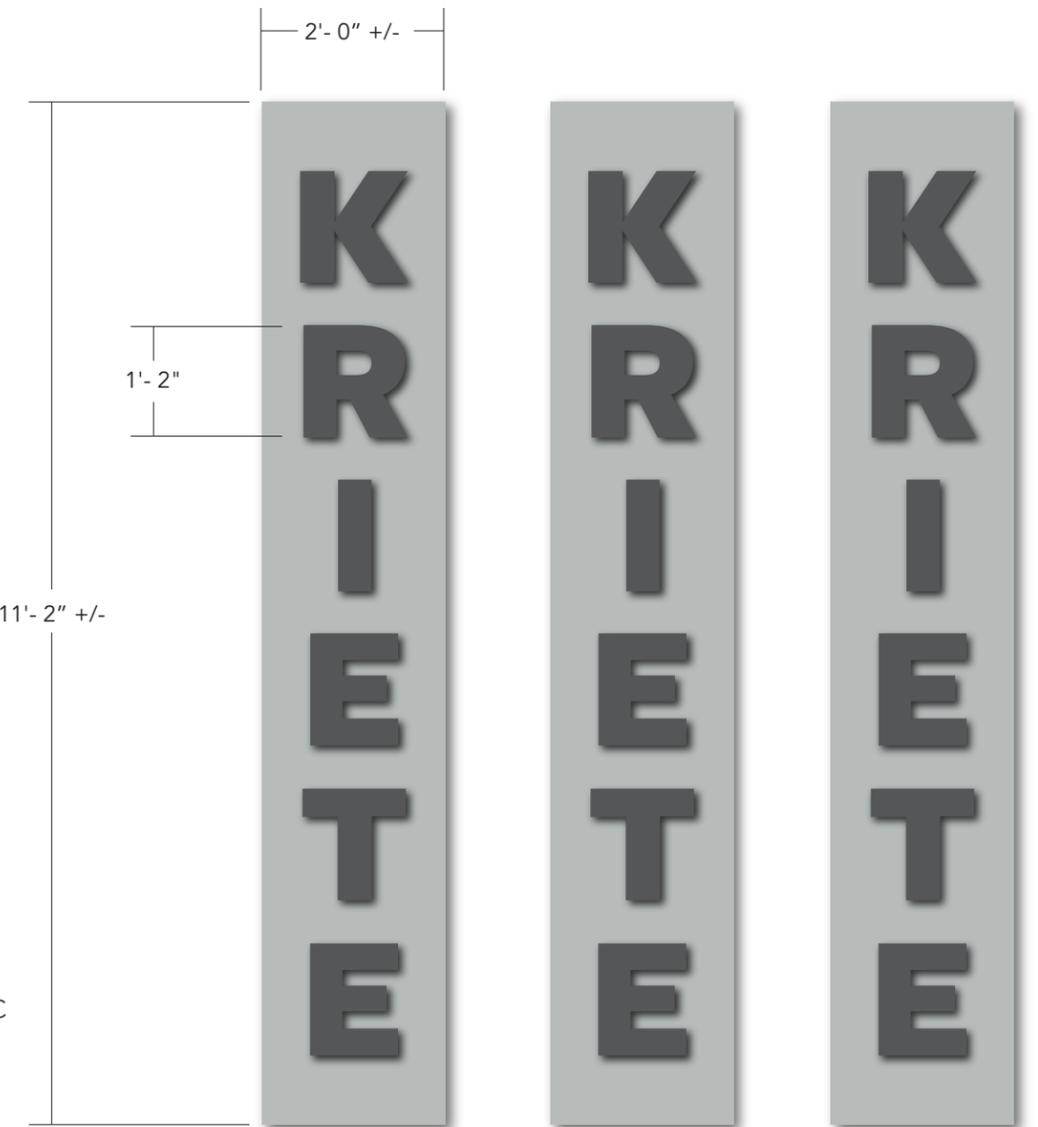
SUBMIT



Existing double face sign [opposite side is identical]



Rendered with proposed face change



See page B.1 for fabrication details



Existing blank face



Rendered with proposed face change

1

DESCRIPTION: Aluminum Face Change [total of 3]
COLOR: Match existing [spec TBD]
LIGHTING: Internal White LEDs
INSTALLATION: Replace existing faces

2

DESCRIPTION: Routed-thru Face with Clear Acrylic Push-thru Letters [1/4" beyond face]
COLOR: White Acrylic with 3M 180C Dark Gray Perforated Vinyl applied to the 1st Surface [gray by day / white by night]

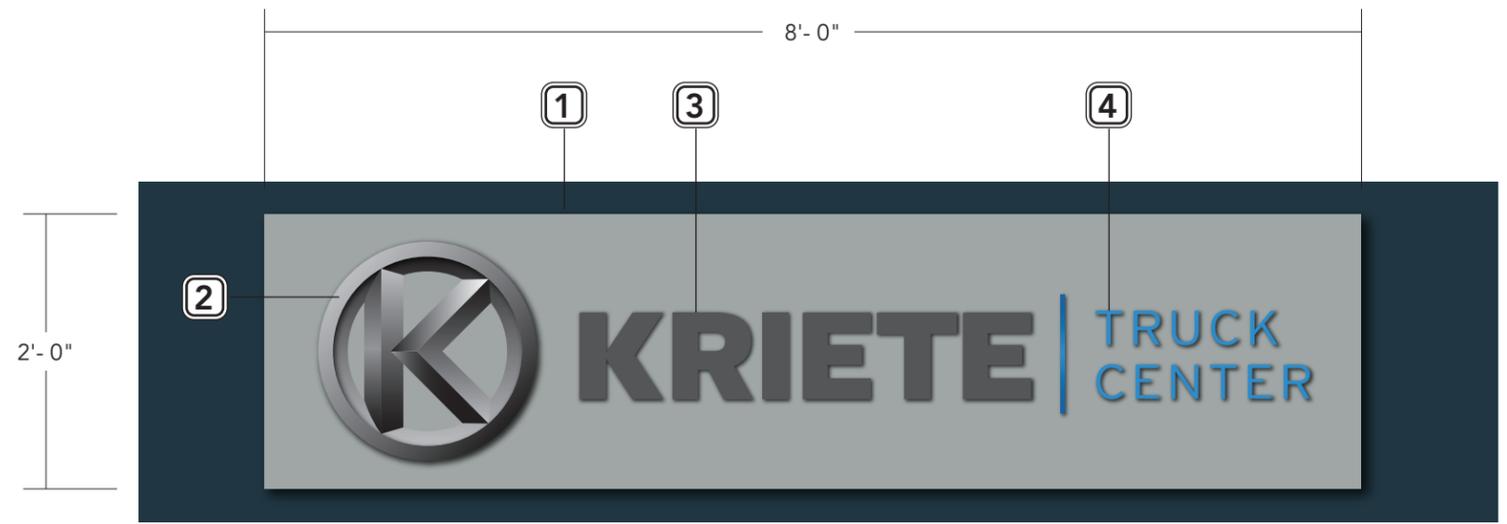


Existing elevation



Rendered with proposed signage replacement

See page A.1 for fabrication details



*verify available space

- 1**

DESCRIPTION: 1" deep Aluminum Pan
COLOR: Match existing [spec TBD]
INSTALLATION: Mount to existing Fascia
- 2**

DESCRIPTION: 1/4" thick Flat Cut Out Logo
COLOR: Apply Digital Print to the 1st Surface [gray returns }
INSTALLATION: Stud Mount to Aluminum Pan
- 3**

DESCRIPTION: 1/4" thick Flat Cut Out Letters
COLOR: Paint to match 3M 180C Dark Gray Vinyl
INSTALLATION: Stud Mount to Aluminum Pan
- 4**

DESCRIPTION: 1/4" thick Flat Cut Out Letters
COLOR: Paint to match 3M 3630-127 Intense Blue Vinyl
INSTALLATION: Stud Mount to Aluminum Pan