



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)

Nathan Glicksman House

ADDRESS OF PROPERTY:

2411 N. Terrace Ave., Milwaukee, WI 53211

2. NAME AND ADDRESS OF OWNER:

Name(s): Robert Chang

Address: 2411 N. Terrace Ave.,

City: Milwaukee State: WI ZIP: 53211

Email: rschang219@gmail.com

Telephone number (area code & number) Daytime: 414-687-7786 Evening: Same

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

Name(s): Nimmer Heating

Address: 6530 W. Forest Home Ave.,

City: Milwaukee State: WI ZIP Code: 53220

Email: malinda@nimmerheating.com

Telephone number (area code & number) Daytime: 414-543-3626 Evening: Same

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.

We plan to install A/C system into home. Condenser to be placed on roof of garage located at the back of property. Installing a Bryant 127ANA048 condenser, which is a 4 ton 17-SEER 2-stage unit. Lineset planned to be ran from attic air handler to basement. Lineset ~~to~~ hide to be used from outside of basement upside of home to roof.

6. SIGNATURE OF APPLICANT:



Signature

Malinda Erdmann
Please print or type name

2/18/22
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