



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: 807-811 E. BRADY STREET
TAX KEY 360-0313-000

2. NAME AND ADDRESS OF OWNER:

Name(s): STAN & PATRIQA LARSON, DAVID LARSON

Address: W148 N7739 MENOMONEE MANOR DRIVE

City: MENOMONEE FALLS State: WI ZIP: 53051

Email: dlavson301@aol.com

Telephone number (area code & number) Daytime: 262-573-5725 Evening: (262) 573-5725

*filed @ HPC
5/8/15*

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.

- 1) REPLACE STEEL SERVICE DOOR, SOUTHWEST REAR CORNER OF BUILDING.
- 2) PAINT REAR OF BUILDING
- 3) REPLACE ASPHALT DRIVE ON BACK OF BUILDING

6. **SIGNATURE OF APPLICANT:**

DAVID LAWSON
Signature

DAVID LAWSON
Please print or type name

Date MAY 6, 2015

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

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

SUBMIT

DAVID D. LARSON
650 WILLIAMS DRIVE
CEDARBURG, WI 53012

262-573-5725 EMAIL: DLARSON301@AOL.COM

May 6, 2015

Historic Preservation Commission
City Clerk's Office - Attention Carlen
200 E. Wells Street Room B-4
Milwaukee, WI 53202

RE: 807-811 E. Brady Street, Milwaukee 53211
Tax key #: 360-0313-000

Hi Carlen,

Just wanted to follow up on our Monday phone discussion regarding your verbal approval for us to replace an existing flush metal service door on the southwest corner of the building with a new commercial grade heavy duty metal flush door, with new frame and threshold. It will be painted the architectural brown, which is the current door color.

We also discussed finishing the exterior painting of the rear building which will be painted the primary color which is on both the north and west side of building. We had run into weather and contractor delays and it wasn't completed last year. We are also planning to replace broken asphalt on small driveway behind the building. I have discussed with paving contractor that asphalt needs to be pitched so that it runs away from the building and to the west.

Please let me know if you need anything else.

Sincerely,

A handwritten signature in black ink that reads "David Larson". The signature is written in a cursive style with a large, sweeping "D" and a long, horizontal stroke at the end.

David Larson