



E-PERMITS 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)

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ADDRESS OF PROPERTY: 931 N 33RD ST

2. NAME AND ADDRESS OF OWNER:

Name(s): MARC A BENZAKEIN

Address: 931 N 33RD ST

City: MILWAUKEE WI State: WI ZIP Code: 53208

Telephone number (area code & number): unlisted

Fax:

Email Address:

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

Name(s): BURKHARDT HEATING & A/C INC

Address: 9055 N 51ST ST UNIT D

City: BROWN DEER State: WI ZIP Code: 53223

Telephone number (area code & number): (414) 355-5520

Fax: (414) 355-5506

Email Address: burkhardtsheating@msn.com

4. DESCRIPTION OF PROJECT:

A. Describe all existing features that will be affected by proposed work. Please specify the condition of materials, design, and dimensions of each feature (additional pages may be attached) Describe all proposed work, materials, design, dimensions and construction technique to be employed (additional pages may be attached)

INSTALL (2) BRYANT 987MA042080 80,000 BTU GAS FURNACES AND (2) BRYANT 197BNA036 3-TON A/CS

5. ELECTRONIC SIGNATURE:

BURKHARDT HEATING & A/C INC 1/1/0001

Name

Date

PHONE: (414) 286-5712

FAX: (414) 286-0232