



**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: 2134 N TERRACE AV

2. NAME AND ADDRESS OF OWNER:

Name(s): MICHAEL WHITE

Address: PO BOX 245020

City: MILWAUKEE WI State: WI ZIP Code: 53224

Telephone number (area code & number): unlisted

Fax:

Email Address:

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

Name(s): Riverside Plumbing

Address: N44 W32810 Watertown Plank

City: Nashotah State: WI ZIP Code: 53058

Telephone number (area code & number): (262) 367-3000

Fax: (262) 367-3001

Email Address: riversideplumbing@gmail.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 new boiler, infloor heating, Unico AC and Snow melt connected to existing boiler.

5. ELECTRONIC SIGNATURE:

Riverside Plumbing 1/1/0001

Name Date

PHONE: (414) 286-5712 FAX: (414) 286-0232