



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:

2508 N Grant Blvd

2. NAME AND ADDRESS OF OWNER:

Name(s): Steven Seer

Address: 2508 N Grant Blvd

City: Milwaukee

State: WI

ZIP: 53210

Email: Steven.Seer@cbre.com

Telephone number (area code & number) Daytime: 414-378-6014

Evening: 414-378-6014

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.

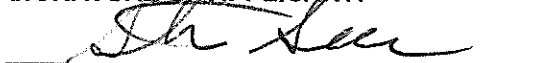
5. DESCRIPTION OF PROJECT:

Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached.

Complete roof tear off of old shingles on house. Lay 2 rows of ice and water shield on eaves and in roof valleys. Lay 1 row of ice shield around dormer and chimney. Cover remaining roof with 15 lb roofing felt. Nail metal in valleys. Replace 2 lead pipe covers and replace chimney flashing (color: Musket Brown #59). Cover all old vent boxes and cut out new roof ridge venting. Re shingle with Owens Corning dimensional Shingle (Color: Flagstone).

Repair Yankee gutters with new rubber coating.

6. SIGNATURE OF APPLICANT:



Signature

Steven Seer
Please print or type name

5-26-17
Date

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.

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