



## 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)

Historic Mitchell St

ADDRESS OF PROPERTY:

733 W Historic Mitchell St

2. NAME AND ADDRESS OF OWNER:

Name(s): Voces De La Frontera

Address: 733 W Historic Mitchell St

City: Milwaukee

State: WI

ZIP: 53204

Email: vdlf.orgprimitivo@

Telephone number (area code & number) Daytime: 4142183331

Evening: 4142183331

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

Name(s): Ryan Pattee

Address: PO Box 806

City: Muskego

State: WI

ZIP Code: 53150

Email: rpattee@gmail.com

Telephone number (area code & number) Daytime: 4146909826

Evening: 4146909826

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 will be tuckpointing north facing front of building above 2nd floor windows, apprx 2 ft tall by 30 ft long section. We will be tuckpointing and repairing cracks on concrete masonry above windows on 2nd floor. We will replace missing decorative concrete pediment on west side 2nd floor. We will use SM200 WI White mortar and will match column as exact to original as possinle using approved materials in a wrokmanship like manner.

**6. SIGNATURE OF APPLICANT:**

\_\_\_\_\_  
Signature



Ryan Pattee

Please print or type name

02/22/2021

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**

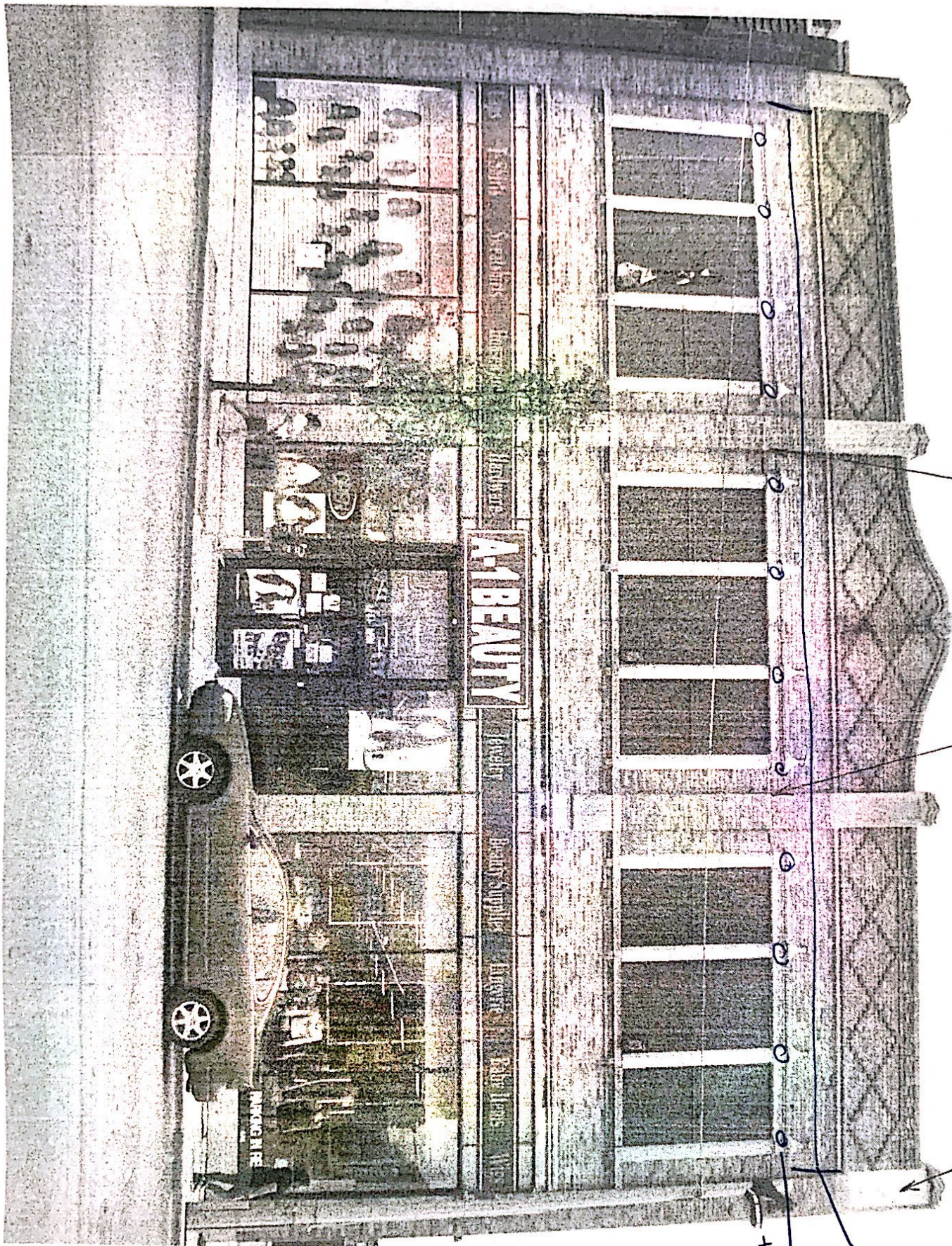
[hpc@milwaukee.gov](mailto:hpc@milwaukee.gov)

[www.milwaukee.gov/hpc](http://www.milwaukee.gov/hpc)

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

**SUBMIT**

6/22/12



NORTH FACADE

REPAIR PILASTERS

INSERT NEW PEDIMENT

touchpoint  
cracks.

touchpoint

NORTH (LEFT) FACADE IS IN  
NEED OF REPAIR



VIEW LOOKING SOUTHEAST  
WEST (RIGHT) FACADE IS IN  
GOOD CONDITION

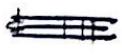


PILASTER @ LEFT OF CENTER - NORTH FACE

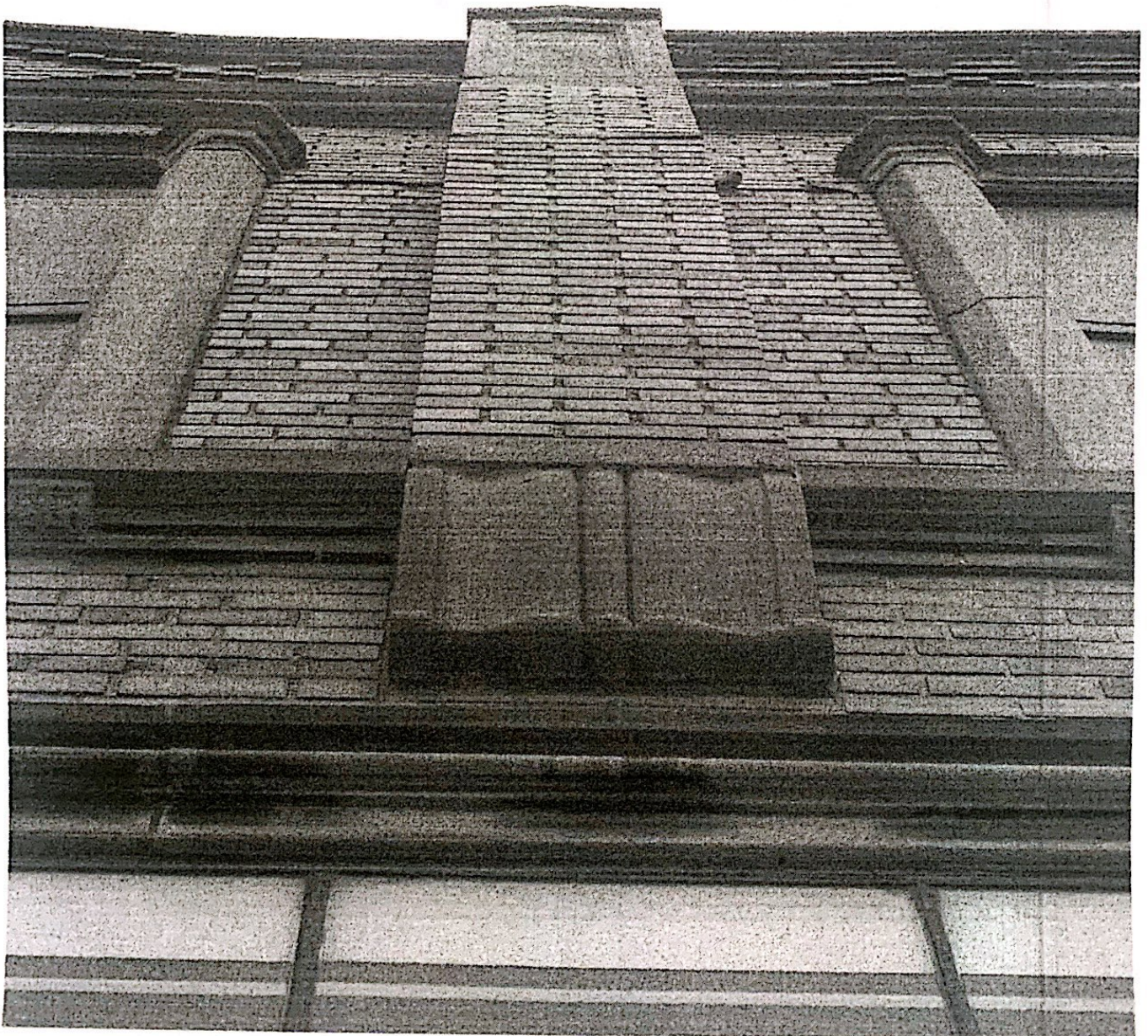
REPAIR BRICKS, MORTAR, STONE, SUPPORT ~~THE~~  
~~BACK TO STRUCTURE~~

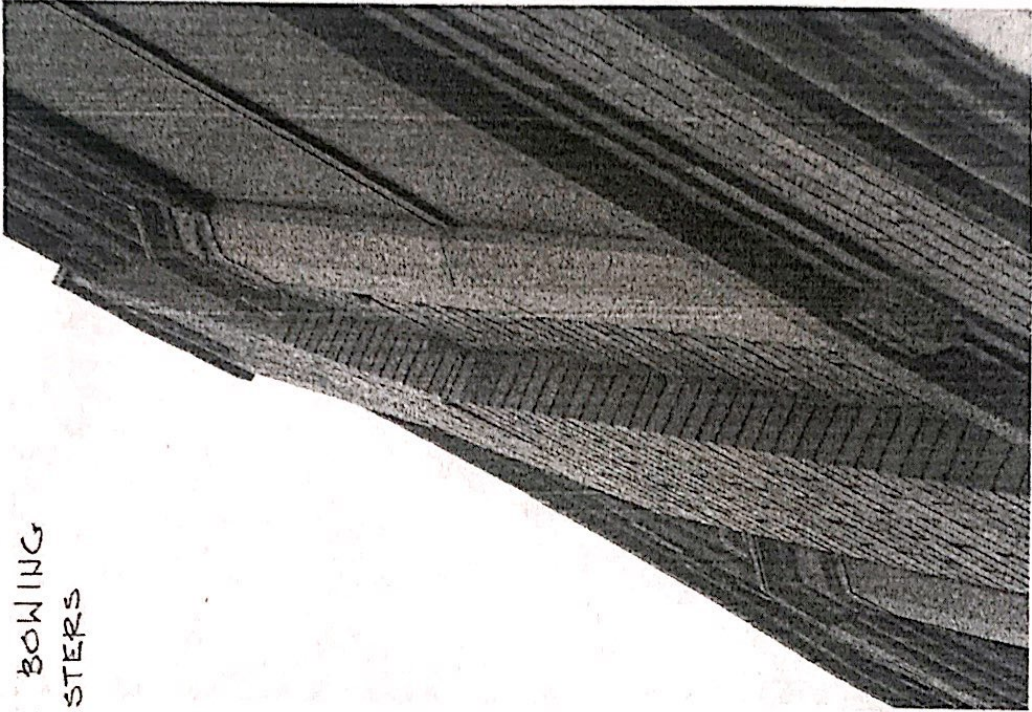


PILASTER @ RIGHT OF CENTER - NORTH FACE

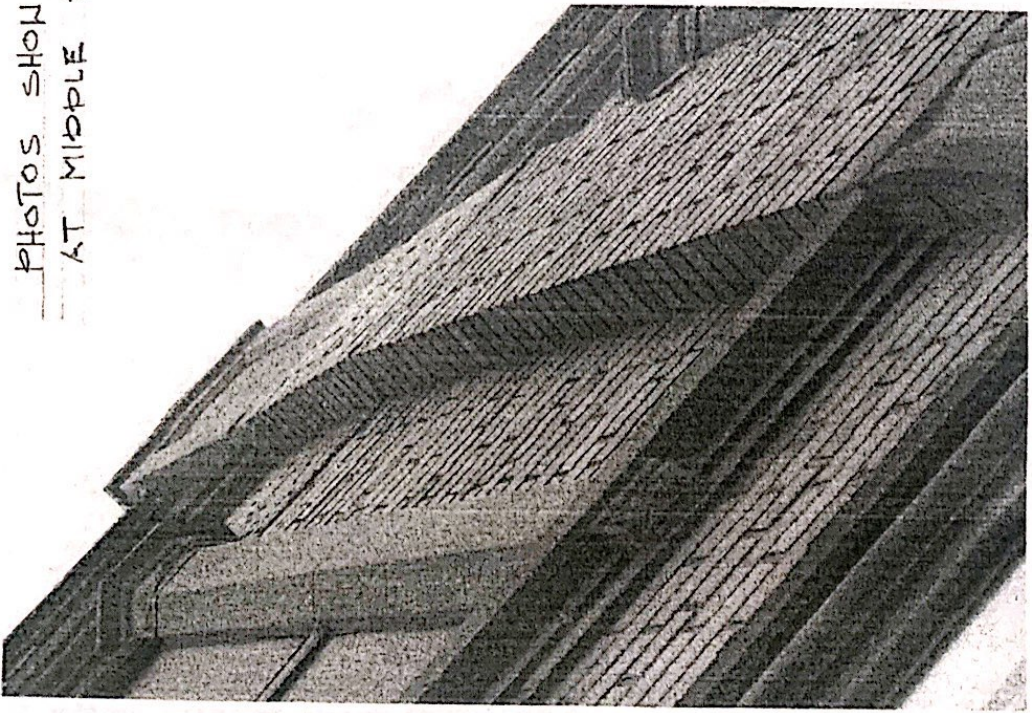
REPAIR BRICKS, MORTAR, STONE, SUPPORT 

~~BACK TO STRUCTURE~~

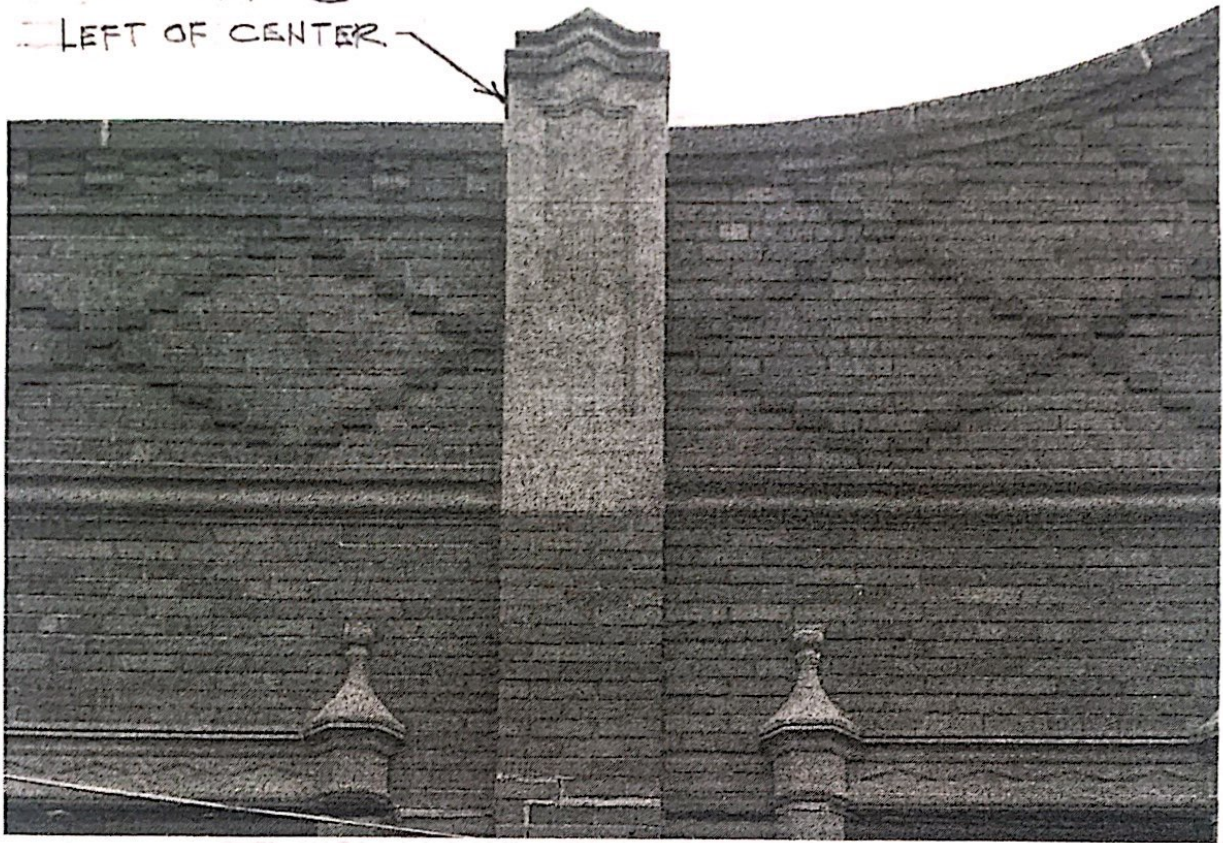




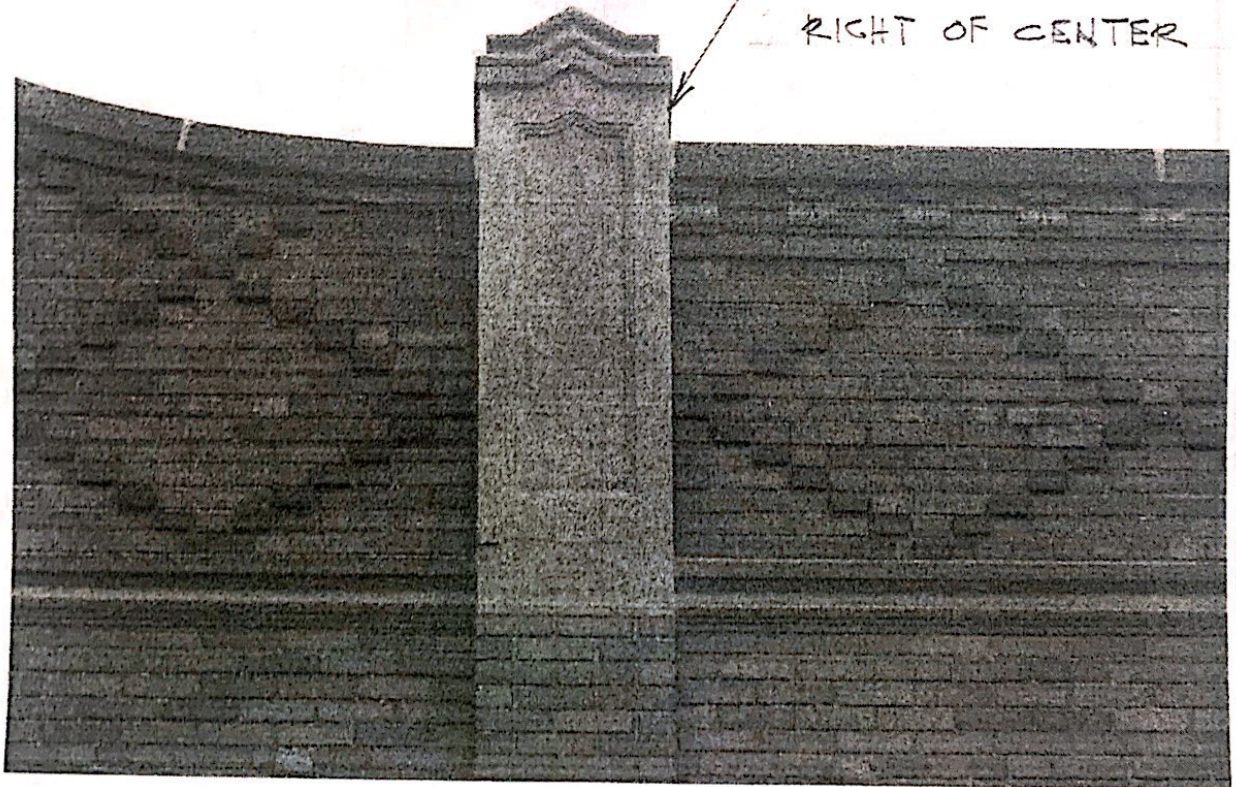
PHOTOS SHOWING BOWING  
AT MIDDLE PILASTERS



PILASTER @  
LEFT OF CENTER



PILASTER @  
RIGHT OF CENTER

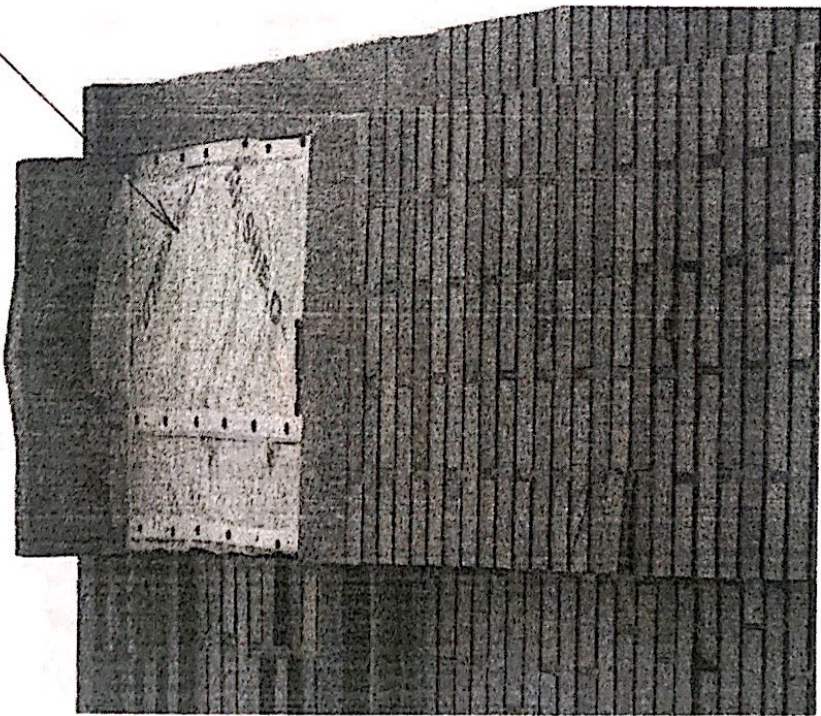




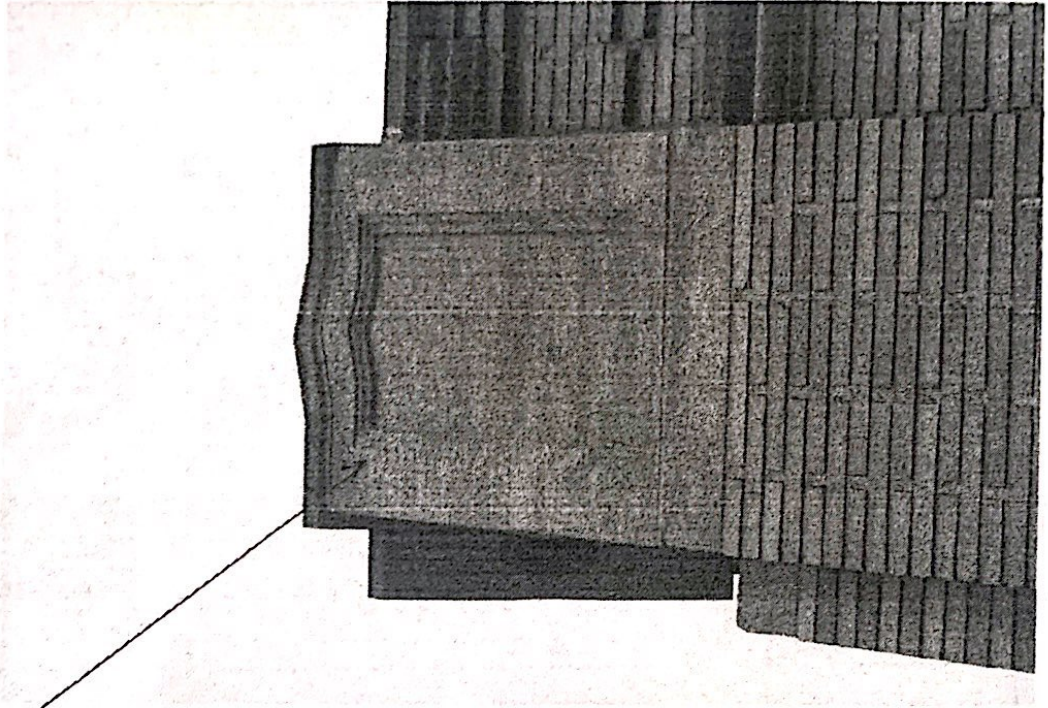
\* PIN IN PLACE WITH STAINLESS  
STEEL RODS & MORTAR

EXISTING PEDIMENT

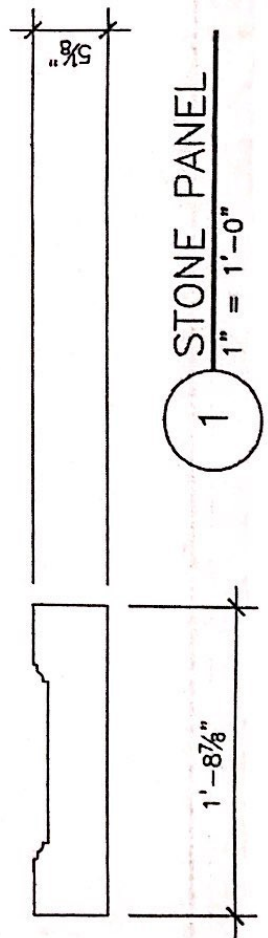
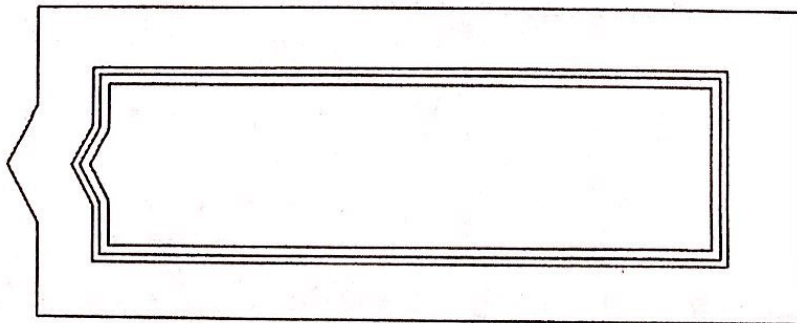
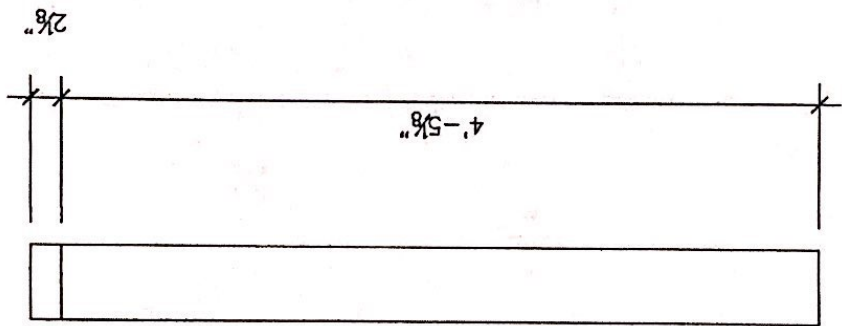
INSERT REPLACEMENT  
PEDIMENT TO MATCH EXISTING  
(INDIANA LIMESTONE - BUFF COLOR)\*



TOP NORTH @ NW



TOP WEST @ NW



B

