

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

lioing with history 1. HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known) ADDRESS OF PROPERTY: 2. NAME AND ADDRESS OF OWNER: Name(s): Address: ZIP: City: State: Email: Telephone number (area code & number) Daytime: Evening: 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) Α. **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.

DESCRIPTION OF PROJECT: 5.

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

As we are renovating parts of there is adequate HVAC. We from W Historic Mitchell or S the HVAC unit will be 5'-6" tall to see the unit. The unit is locathe West.	have positioned the unit or 8th St. The roof parapet al . As the unit is set back 45	n the roof in a way so that i long W Historic Mitchell str o'-10" beyond the street from	t will not be visible eet is 4'-2" tall and ntage there is no way

6	CICMATUDE	ΛE.	ADDI	ICANT.

Signature

Danny Merkt

7-12-2024 Date Please print or type name

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 www.milwaukee.gov/hpc hpc@milwaukee.gov

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

