



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)

Walkers Point

ADDRESS OF PROPERTY:

219 S 2nd St Milwaukee

2. NAME AND ADDRESS OF OWNER:

Name(s): Lloyd Parks

Address: 217 S 2nd St

City: Milwaukee State: WI ZIP: 53204

Email: lloyd_parks@yahoo.com

Telephone number (area code & number) Daytime: 3057752818 Evening: 3057752818

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

Name(s): K Komfort Inc - Jay Eisenhower

Address: 1201 6th Ave E

City: Grafton State: WI ZIP Code: 53024

Email: Jay.Eisenhower@KKomfort.com

Telephone number (area code & number) Daytime: 4143993097 Evening: 262 375 0075

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.


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12/14/10
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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.

Exterior penetrations for HVAC system.
None to store front of building.
Placement of new A/C condensing units
on back of building. See attached pictures

6. **SIGNATURE OF APPLICANT:**


Signature

Jay Eisenhower
Please print or type name

12/13/18
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.

Mail or Email Form to:

Historic Preservation Commission
City Clerk's Office
841 N. Broadway, Rm. B1
Milwaukee, WI 53202

PHONE: (414) 286-5722

hpc@milwaukee.gov

www.milwaukee.gov/hpc

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

SUBMIT