



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)

North Point North

ADDRESS OF PROPERTY:

2803 E. Bradford Avenue

2. NAME AND ADDRESS OF OWNER:

Name(s): Lisa Groskopf

Address: 4757 N. Cramer Street

City: Whitefish Bay

State: WI

ZIP: 53217

Email: lggleason33@hotmail.com

Telephone number (area code & number) Daytime: 414.961.8822

Evening: 414.961.8822M De

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

Name(s): M Design Build Inc

Address: 11512 N. Port Washington Road

City: Mequon

State: WI

ZIP Code: 53092

Email: terry@m-designbuild.com

Telephone number (area code & number) Daytime: 414.313.1813

Evening: 414.313.1813

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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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.

Change garage door from wood to insulated aluminum. The style of the door will be the same except in white aluminum. We are proposing the CHI 5300 (see attachment). The CHI 5400 was on the original plans.

6. SIGNATURE OF APPLICANT:



Signature

Terry Perschbacher
Please print or type name

7-8-19
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 www.milwaukee.gov/hpc

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

SUBMIT

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