



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)

Concordia

ADDRESS OF PROPERTY:

3002 w kilbourn ave

2. NAME AND ADDRESS OF OWNER:

Name(s): Brian Janis

Address: 3002 w kilbourn ave

City: Milwaukee

State: WI

ZIP 53208

Email: brianjanis@yahoo.com

Telephone number (area code & number) Daytime: 414-559-8884

Evening:

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

Name(s): Big Heer Inc

Address: 4280 N 145th St

City: Brookfield

State: WI

ZIP Code: 53005

Email:

Telephone number (area code & number) Daytime: 414 453 6076 Evening: Same

4. ATTACHMENTS

A. REQUIRED FOR ALL PROJECTS:

Photographs of affected areas & all sides of the building (annotated photos recommended)

Sketches and Elevation Drawings (1 full size and 2 reduced to 11" x 17" or 8 1/2" x 11")

Material and Design Specifications (see next page)

B. NEW CONSTRUCTION/DEMOLITION ALSO REQUIRES:

Floor Plans (1 full size and 1 reduced to 11" x 17")

Site Plan showing location of project and adjoining structures and fences

Other (explain):

PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED.

5. DESCRIPTION OF PROJECT:

Describe all existing features that will be affected by proposed work. Please specify the condition of materials, design, and dimensions of each feature (additional pages may be attached)

Photo No. _____ Drawing No. _____

B. Describe all proposed work, materials, design, dimensions and construction technique to be employed (additional pages may be attached)

2" PUC pipe painted to match
Building sticking out no more than
2 1/2 inches for exhaust near halfway
point of west elevation.

Photo No. _____ Drawing No. _____

6. SIGNATURE OF APPLICANT:



Signature

David A Schmalzer _____
Print or type name 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.

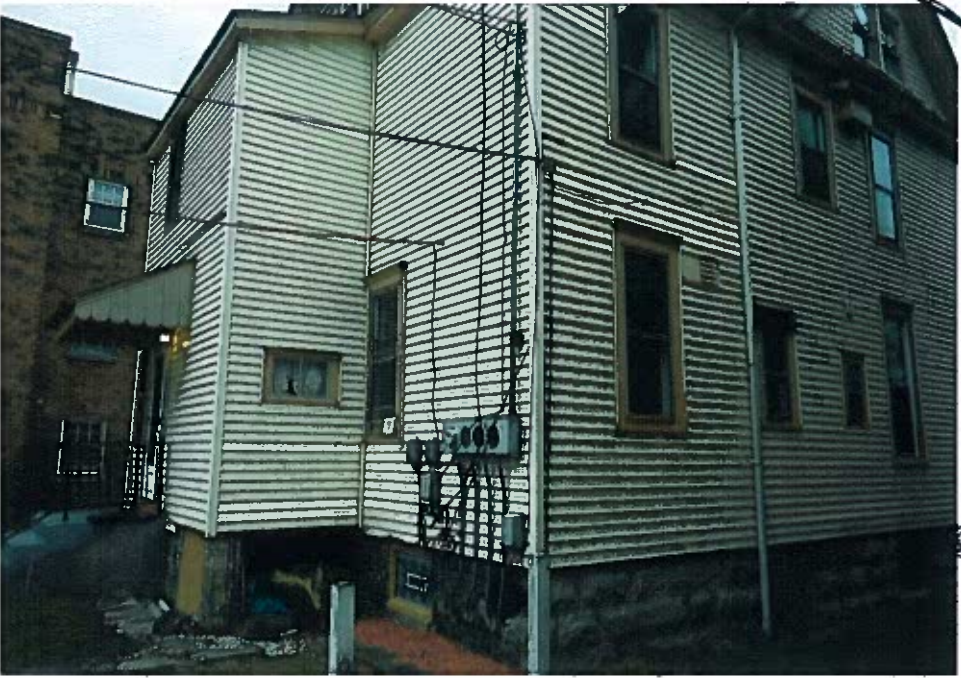
Hand Deliver or Mail Form to:
Historic Preservation Commission
City Clerk's Office
200 E. Wells St. Room B-4
Milwaukee, WI

PHONE: (414) 286-5722

FAX: (414) 286-3004

www.milwaukee.gov/hpc

Side Facing West ↓



↓ Front Facing Kilbourn Ave (South)



Rear Facing North Alley ↑



↑ East Facing 12-Family Dwelling