

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

1034	RESS OF PROPERTY: N Vel R Phillips Ave				
NAM	E AND ADDRESS OF O	WNER:			
Name	ne(s): Milwaukee Turners, Inc				
Addre	ess: 1034 N Vel R Phillips A	Ave			
City: _	Milwaukee	State: WI	ZIP: 53203		
Email	info@milwaukeeturners.o	org			
Telep	hone number (area code	e & number) Daytime: 414-272-1733	Evening: 414-272-1733		
CIIV .	Bayolao	State	ZIF Code.		
	ess: 9421 N Fairway Circle Bayside	State: WI	ZIP Code: ⁵³²¹⁷		
•	admin@milwaukeeturners	s.org			
Email	admin@milwaukeeturners		Evening: 414-305-8569		
Email		s.org e & number) Daytime: 414-305-8569	Evening: <u>414-305-8569</u>		
Email Telep	hone number (area code	e & number) Daytime: 414-305-8569 projects can vary in size and scope, ple	-		
Email Telep ATTA at 414	whone number (area code ACHMENTS: (Because p 4-286-5712 for submittal	e & number) Daytime: 414-305-8569 projects can vary in size and scope, place requirements)	-		
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Email Telep ATTA at 414	ACHMENTS: (Because points) 4-286-5712 for submittal REQUIRED FOR MAL Photographs of affects Sketches and Elevation A digital copy of the phomographs Material and Design S NEW CONSTRUCTIO	e & number) Daytime: 414-305-8569 projects can vary in size and scope, play requirements) JOR PROJECTS: ed areas & all sides of the building (and purchase) on Drawings (1 full size and 1 reduced the hotos and drawings is also requested. Specifications (see next page)	ease call the HPC Office notated photos recommende to 11" x 17" or 8 ½" x 11")		

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.

The scope of work for this project includes safety and security upgrades to the building, made possible by a FEMA Grant received by the owner.

The Safety and Security upgrades include the following.

- 1. Provide new clear Safety and Security window film at select doors on the north elevation.

 Install the En Gauge fire extinguisher monitoring system Upgrade the existing fire safety system control panel to a new model compatible with the fire extinguisher monitoring equipment and other wireless monitoring services. Replace wood windows along the East and North Elevations, with a new wood window to match in kind and laminated safety glass.
Please see the attached Exhibit document for a more detailed scope of work, with photographs, drawings and notes highlighting the proposed work.

6.	SIGNATURE OF APPLICAN	T:
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Simply					
Signature 7 3 3					
Emilio De Torre	2/13/2025				
Please print or type name	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.

