



# 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)**

Grant Boulevard Historic District

**ADDRESS OF PROPERTY:**

2463 N Grant Boulevard

**2. NAME AND ADDRESS OF OWNER:**

Name(s): E & G Investments LLC

Address: PL Box 80716

City: Milwaukee

State: WI

ZIP: 53208

Email:

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

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

Name(s): Affordable Heating & A/C, Inc

Address: 4630 S Kinnickinnic Avenue

City: Cudahy

State: WI

ZIP Code: 53110

Email: kathy@affordablehtg.com

Telephone number (area code & number) Daytime: 414-481-2727 Evening:

**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.**

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.

We have been contracted by SDC to replace the chimney vented boiler with a +90% PVC vented gas boiler. The boiler will require PVC venting out the side wall. I have attached a photo of the location of the proposed location of the PVC. The vent will be painted to match the color of the home. Also, the PVC venting, will be hidden partially by the front brick pillar on the south side of the front of the home and by the shrubbery.

6. **SIGNATURE OF APPLICANT:**

Kathleen Rasmussen  
Signature

Kathleen Rasmussen  
Please print or type name

2/13/2018  
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 53202

**PHONE: (414) 286-5722**

[hpc@milwaukee.gov](mailto:hpc@milwaukee.gov)

[www.milwaukee.gov/hpc](http://www.milwaukee.gov/hpc)

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

**SUBMIT**