

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

	PRESS OF PROPERTY: E. Brady Street		
•	ME AND ADDRESS OF OWNER: MIKE Lee		
Addı	ess:		
City:	Milw. WI State: WI ZIP: 53707		
Ema	:		
Tele	phone number (area code & number) Daytime: 414 -520 Evening: Swe		
APP	LICANT, AGENT OR CONTRACTOR: (if different from owner)		
	e(s): Soshia L. Malone		
Addr	ess: 1329 E. Brady		
City:	Milw, State: WT ZIP Code: 5320		
	il: imalone nomadagnail : com		
	phone number (area code & number) Daytime: 44-745-5807 Evening: Source		
at 41	ACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4-286-5712 for submittal requirements)		
Ά.	REQUIRED FOR MAJOR PROJECTS:		
Emily (configuration) consistent a la biblio	Photographs of affected areas & all sides of the building (annotated photos recommended		
XX	Sketches and Elevation Drawings (1 full size and 1 reduced to 11" x 17" or 8 ½" x 11") A digital copy of the photos and drawings is also requested.		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Material and Design Specifications (see next page)		
В.	NEW CONSTRUCTION ALSO REQUIRES:		
	Floor Plans (1 full size and 1 reduced to a maximum of 11" x 17")		
	Floor Flans (Fluid size and Freduced to a maximum of FF x F/)		

AND SIGNED.

BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED

6/22/12

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.

Install new externally-illuminated individual letter sign above storefront windows.

Front of building Sign for Malone's on Brady 1329, E. Brady

Sign is 10' wide and 2' High

-All Material is cedur

- out door black paint for the Lettering, and Dark brown stain for border and light prown stain for inner Back round,

:6.	SIGNATURE OF APPLICANT:		
	Jah Mida		
	Signature	-	•
	Vitash Malone	1,22.2014	

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.

Date

Hand Deliver or Mail Form to: Historic Preservation Commission City Clerk's Office 200 E. Wells St. Room B-4 Milwaukee, WI 53202

Please print or type name

PHONE: (414) 286-5722

FAX: (414) 286-3004

www.milwaukee.gov/hpc

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* Outdoor paint on for the letters