



## 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)**

Historic Mitchell Building

**ADDRESS OF PROPERTY:**

601-15 West Historic Mitchell Street, 1719-29, 1733, and 1733a S. 6th Street

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

Name(s): Mitchell Street Group, LLC (Geoff Stone)

Address: P.O. Box 511542

City: Milwaukee

State: WI

ZIP: 53203

Email: geoffreycstone@gmail.com

Telephone number (area code & number) Daytime: 414-669-6822

Evening:

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

Name(s): TDI Associates Inc. (Rob Williams)

Address: N8 W22350 Johnson Drive, B4

City: Waukesha

State: WI

ZIP Code: 53185

Email: rob.w@tdiae.com

Telephone number (area code & number) Daytime: 262-409-2530

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.

The owner is proposing to construct a secure surface parking lot for the existing building. The parking lot will be surrounded with a wrought iron fence 6' tall with brick piers along 6th Street. There will be a sliding wrought iron gate at the entrance to the parking lot.

The brick piers will match the brick on the existing building and will be 7' tall and 24"x24". See the attached plans for the parking lot layout, brick piers, and fence location.

**6. SIGNATURE OF APPLICANT:**



Signature

Goff Stone

Please print or type name

1-16-14

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**

**FAX: (414) 286-3004**

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