

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

living with history

RECEIVED

	STORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known) ames Peck Historic District				
	RESS OF PROF N. Waverly Place	'ERTY:			
NAM	E AND ADDRES	SS OF OWNER:			
Name	e(s): Immanuel Pr	esbyterian Church			
Addre	ess: 1105 N. Wav	erly Place		,,,,,	
City:	Milwaukee	State: WI	ZIP: 53202		
Emai	ipc@immanuelv	vi.org			
Telep	ohone number (a	rea code & number) Daytime: 414-276-4	757 Evening:		
APPL	LICANT, AGENT	OR CONTRACTOR: (if different from o	owner)		
Name	e(s): SAME				
Addre	ess:				
City:		State:	ZIP Code:		
Email	l:				
Telep	hone number (a	rea code & number) Daytime:	Evening:		
at 414	4-286-5712 for s	ecause projects can vary in size and sco ubmitta! requirements)	pe, please call the HPC	Office	
A.	REQUIRED F	OR MAJOR PROJECTS:			
	Photographs	of affected areas & all sides of the buildir	ng (annotated photos rec	ommended)	
	Sketches and A digital copy	Elevation Drawings (1 full size and 1 red of the photos and drawings is also reque	duced to 11" x 17" or 8 ½ ested.	" x 11")	
Χ	Material and Design Specifications (see next page)				
В	NEW CONST	NEW CONSTRUCTION ALSO REQUIRES:			
	Floor Plans (1	full size and 1 reduced to a maximum o	f 11" x 17")		
	Site Plan show	ving location of project and adjoining stru	uctures and fences		
PLF	ASE NOTE:	YOUR APPLICATION CANNO	T RE PROCESSED	IINI ESS	

AND SIGNED.

BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED

## 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.

Rebuild front porch attached to main structure. Replace existing decking with IPE. Replace balustrade and rails with new custom milled to match existing in profile and height. Replace fascia crown and mouldings on porch with new custom milled material. Remove and replace existing stairs.

Work on bay window (South Elevation): Re-frame cantilevered structure to correct sagging. Replace bed moulding, cove, casing, sill and rope with new material.

Remove and replace existing storm windows with new custom made storm windows.

Prime and paint all of the above with the exception of the IPE decking.

No work to be done on existing metal roof at this time.

6. SIGNATURE OF AP	PLICANT:
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Signature

Vance E. Werner, Jr., Agent

Please print or type name

April 25, 2013

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

6/22/12

SUBMIT