

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

	RESS OF PROPERTY: 2474 N. SHAPANAN BL.
NAME	E AND ADDRESS OF OWNER:
Name	(s): Elizabeth A Lelaney
	958: 3522 N 8710 St
City:	Milwayku W State: WY ZIP: 53210
Email	edelaney 443 (a) a may com
Telen	hone number (area code & number) Daytime: (4/4)840-555 Evening: 50mm
APPL	ICANT, AGENT OR CONTRACTOR: (if different from owner)
Name	e(s):
Addre	ess:
City:	State: ZIP Code:
Email	
	hone number (area code & number) Daytime: Evening:
ı etep	Holic Humber (area sous a names)
ATTA	ACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4-286-5712 for submittal requirements)  REQUIRED FOR MAJOR PROJECTS:
ATTA at 414	ACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4-286-5712 for submittal requirements)
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ATTA at 414	ACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4-286-5712 for submittal requirements)  REQUIRED FOR MAJOR PROJECTS:  Photographs of affected areas & all sides of the building (annotated photos recommend. 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.
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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.

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O Repair, Restore & Replace leaded glass windows with necessary to bring back to original state. Norm Dunk will Restorm all work.	materials kelberger
@ Rejair and performal Tack sointing recessary exterior price work of home. Norm Dun kelbe ensure materials used will mater color/size of	to ger will material
of onlying work.  (3) Repair broken concrete of two car driven which accesses Center Street.	vay
which accesses Center Street.  (1) Install 6 (SIX) foot tall privacy fence in privacy fence	back.
yard-Dog eared style rence.	
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6.	SIGNATURE OF APPLICANT!	•
,	Elyal H Money	•
	Signature	June 16, 2014
	Please print or type name	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.goy/hpc

