

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review. Please print legibly.

HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known) 1.

NORTH POINT NORTH HISTORIC

ADDRESS OF PROPERTY

2822 E. BELLEVIEW

MILWAUKEE

NAME AND ADDRESS OF OWNER: 2.

Name(s): MICNAEL AND CINDY HOSALE

Address: 2604 N. LAKE DRIVE

City: MILWAUKEE

State: WI

ZIP: 53211

Email: cynhosale@gmail.com

Telephone number (area code & number) Daytime: 414 491 3792 Evening: 414 491 3792

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

Name(s): WINTONS REMODERING GROUP LLC

Address: 7772 HAR WOOD AVENUE

City: WAUWA TOSA

State: W/

ZIP Code: .53213

Email: Winters group Ilc @ hpeprint. com

Telephone number (area code & number) Daytime: 4/14 77/ 6202 Evening: 4/14 2/8 92/5

ATTACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4. 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 ½" 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

YOUR APPLICATION CANNOT BE PROCESSED UNLESS PLEASE NOTE: 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 "HUNG" BAY WINDOW SECTION OF THE HOUSE

HAS A 1960'S LOOK WITH LAP SIDING THAT IS

NOT OF THE ETA THAT THIS HOUSE COMES

FROM. (SEE PHOTO)

WE PROPOSE TO REMOVE THIS SIDING AND REPLACE

WITH A FLAT INSET PANEL FRAMING WITH SIY"

MINATEC - WHICH WILL BE PAINTED THE

MINATEC - WHICH WILL BE PAINTED THE

COLOR OF THE HOUSE TRIM. (SEE PROPOSED)

6. SIGNATURE OF APPLICANT:
Signature

ROBERT J. SCHULZ

Please print or type name

Date 10-27-15

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

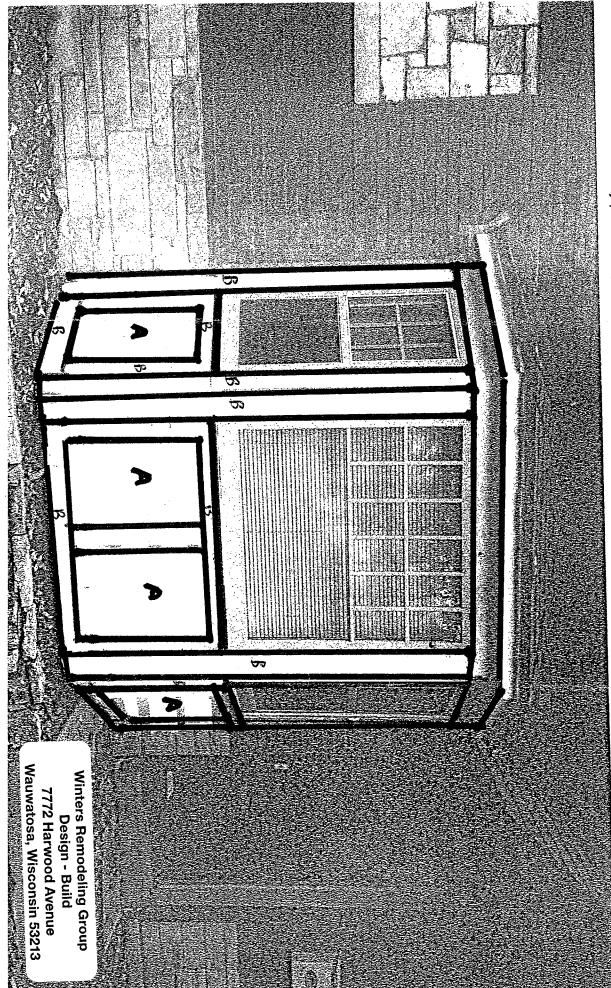
www.miwaukee.gov/hpc

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

2822 E. BELLEVIEW

2822 E. BELLEVIEW - PROPOSEL

A-FLAT PANEL H S/4 MIDATEK -PAINT - SAME COLON





2822 E. BELLEVIEW