



CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

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

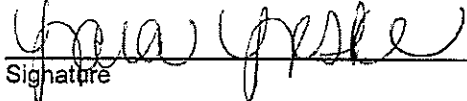
1. **HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT:** (if known)
HUIDEKOPER'S Subdivision ?
ADDRESS OF PROPERTY:
501 Historic W. Mitchell St
 2. **NAME AND ADDRESS OF OWNER:**
Name(s): JAMES N WITKOWIAK
Address: 529 W HISTORIC MITCHELL ST
City: Milwaukee State: WI ZIP: 53204-3510
Email:
Telephone number (area code & number) Daytime: n/a Evening: n/a
 3. **APPLICANT, AGENT OR CONTRACTOR:** (if different from owner)
Name(s): Tara Teske
Address: 608 Creske Ave
City: Rothschild State: WI ZIP Code: 54474
Email: tara@ftsign.com
Telephone number (area code & number) Daytime: 715-845-0500 Evening: 715-551-9971
 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.

Sign Face Change. Jackson Hewitt has an updated Logo. We will be installing new updated faces where the existing faces are located on the building front.

6. SIGNATURE OF APPLICANT:


Signature

Tara Teske
Please print or type name

01/07/2016
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

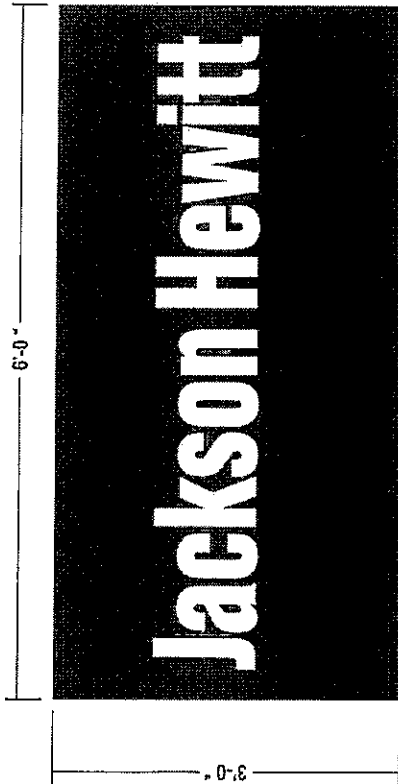
Or click the **SUBMIT** button to automatically email this form for submission.

SUBMIT

6/22/12

Jackson Hewitt
TAX SERVICE

REPLACEMENT PANEL



SIGN: REPLACEMENT ALUMINUM PANEL W/ VINYL GRAPHICS
COPY: "JACKSON HEWITT" - WHITE
"TAX SERVICE" - BLACK
BACKGROUND: 3M 3630-57 OLYMPIC BLUE

COLORS

- WHITE
JACKSON HEWITT
- BLACK
TAX SERVICE
- 3M 3630-57 OLYMPIC BLUE VINYL
BACKGROUND



ENTERA
Your total branding solution



Underwriters
Laboratories Inc.
www.ul.com

THIS SIGNAGE, GRAPHICS, AND/OR LOGO HAS BEEN DESIGNED AND MANUFACTURED IN ACCORDANCE WITH THE UL LISTING FOR THE SIGNAGE CATEGORY. IT IS NOT TO BE USED FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN PERMISSION OF ENTERA.

CLIENT: JACKSON HEWITT
LOCATION: MILWAUKEE, WI
DRAWN BY: ZM

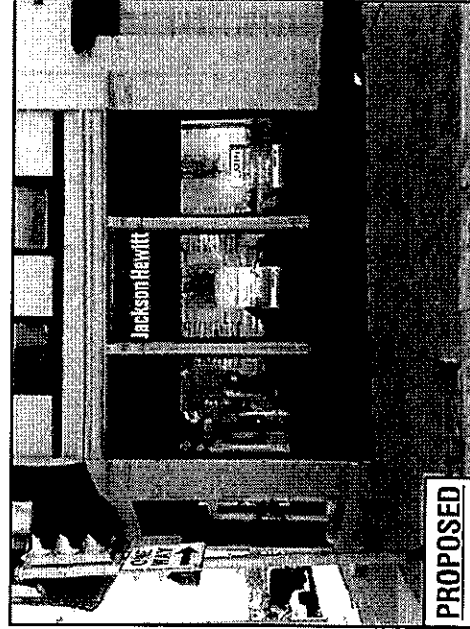
SCALE: 1" = 1'-0"
DATE: 11.30.15

DRAWN BY: ZM
MILWAUKEE, WI - HISTORIC W. MITCHELL ST.

Jackson Hewitt
TAX SERVICE

Jackson Hewitt

3M 3630-57 OLYMPIC BLUE VINYL
844-212-0000



5040.110. MILWAUKEE, WI - HISTORIC W. MITCHELL ST.