MILWAUKEE HISTORIC PRESERVATION COMMISSION
living with history

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)

ADDRESS OF PROPERTY:
1921 N Second st

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

Name(s): Midwest Comerical Funding
Address: 1521 Waukesha Rd
City: Calhonda State: wi ZIP: 53104
Email: robert.chandler@live.com
Telephone number (area code & number) Daytime: 414 731.1151 Evening:

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

Name(s): Bottom To Top Services
Address: P.O. Box 3441992
City: milwaukee State: wi ZIP Code: 53234
Email: Macklin.Jerry@yaloo.com
Telephone number (area code & number) Daytime: 414 839-5999 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 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

PLEASE NOTE: ***YOUR APPLICATION CANNOT BE PROCESSED UNLESS <u>BOTH PAGES</u> 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.

Install new wood windows TO Look old
new corners siding ceder 8" 4½ Lap
Make all siding and windows TO Look Like
orginial
Reboild Front Porch TO orginial
all Eyterion TO Be Ceder

Half round Gutter

6. SIGNATURE OF APPLICANT:

Signature

Gerald Macklin — Please print or type name

6-21-12 — 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