

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)					
ADI	DRESS OF PROPERTY:					
221	0 N Lake Dr Milwaukee, WI 5320		nder miller siel wird William Miller (William in miller (State and war). Waste ste gewest sommen von miller is wirder ist war in verwalt.			
NAI	NAME AND ADDRESS OF OWNER:					
Nar	Name(s):Jagpal Waraich					
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		State: WI				
Em	ail: j_waralch@hotmail.com		mallummundeldalanderen und met die der Johanne der und die der Johanne der der der der der der der der der de			
Tele	ephone number (area code &	number) Daytime: 262-496-2821	Evening:			
API	APPLICANT, AGENT OR CONTRACTOR: (if different from owner)					
Nar	me(s):					
Add	dress:	annanna sarah sahan sahabi sarah	тиниция такжада эст температура (1915) деную у структура праводую температура (1915) году по структура праводу			
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City Em: Tele ATT at 4	pail: ephone number (area code & TACHMENTS: (Because prograte) 14-286-5712 for submittal reconstruction of affected Sketches and Elevation is	State: number) Daytime: jects can vary in size and scope, quirements) R PROJECTS:	ZIP Code: Evening: please call the HPC Office annotated photos recommended) ed to 11" x 17" or 8 ½" x 11")			
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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.

and dimensions. Additional pages may be attached.	
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SIGNATURE OF APPLICANT	٠.

Jogfal Kingh Waraich	
Signature	
JAGRAL SINGH WARAICH	8/16/2016
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.gov/hpc

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