



## 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)

Mitchell St

**ADDRESS OF PROPERTY:**

627 W. Historic Mitchell St.

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

Name(s): Dollar Express

Address: 627 W. Historic Mitchell St

City: Milwaukee

State: WI

ZIP: 53204

Email:

Telephone number (area code & number) Daytime: Evening:

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

Name(s): Sign Effectz Inc - Don Nummendor

Address: 1827 W. Glendale Av.

City: Milwaukee

State: WI

ZIP Code: 53209

Email: donn@signeffectz.com

Telephone number (area code & number) Daytime: 414-312-6985 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 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:

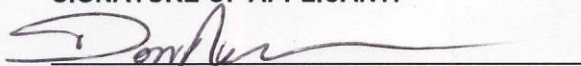
Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached.

We are changing the name of the business from Family Dollar to Dollar Express.

No change in business plan or hours.

Existing sign will be removed and a like size and material sign will be installed.

6. SIGNATURE OF APPLICANT:

  
Signature

Don Nummendor

Please print or type name

12-28-16

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](http://www.milwaukee.gov/hpc)

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

**SUBMIT**








BEFORE



AFTER



COLOR SPEC		
		
PMS 1795	Black	White

25.44 Sq Ft



**DISCLAIMER:** Renderings are for graphic purposes only and not intended for actual construction dimensions. For windload requirements, actual dimensions and mounting detail, please refer to engineering specifications and install drawings. These drawings and designs are the exclusive property of Everbrite LLC. Use of, or duplication in any manner without express written permission of Everbrite LLC is prohibited.

Customer: Dollar Express

Project No: 352419

Scale: NTS

Date: 9/30/16

Drawn By: DB

Location & Site No: Milwaukee, WI  
DEX1516

Description: 24" Inline Cloud Sign

Revised:

**Customer Approval:** Graphics and colors on file will be used unless otherwise specified by customer. Please review drawing carefully. By signing below, you agree to graphics as shown above, and to location of sign as shown. Please return signed copy back to Everbrite.

CUSTOMER SIGNATURE

DATE

LANDLORD SIGNATURE

DATE