



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:

2522 N. Summit Ave

2. NAME AND ADDRESS OF OWNER:

Name(s):

Barry Cymerman

Address:

2522 N. Summit Ave

City:

M, LW

State:

Wi.

ZIP:

53211

Email:

Barry@pcs-law.net

Telephone number (area code & number) Daytime:

(414) 745-4262

Evening:

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

Name(s):

Address:

City:

State:

ZIP Code:

Email:

Telephone number (area code & number) Daytime:

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.

PLEASE SEE ATTACHED
BOARD OF ZONING APPEALS.

6. **SIGNATURE OF APPLICANT:**

Signature

Barry Cymeryn

Please print or type name

Date

5/16/17

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



BOARD OF ZONING APPEALS - CITY OF MILWAUKEE

NOTICE OF APPEAL AND APPLICATION FOR REVIEW

Address of Property: 2522 North Summit Avenue Milwaukee, WI 53211

Petitioner Info

Petitioner Name: Barry M. Cymerman

Mailing Address: 2522 North Summit Avenue

(petitioner must have interest in land)

City / State: Milwaukee, WI

Zip Code 53211

Phone: (414)745-4262

Email or Fax: barry@pcs-law.net

Contact Info

Primary Contact Barry Cymerman

Mailing Address:

(414)745-4262

City / State:

Zip Code

Phone:

Relationship to
petitioner

(e.g. Architect, Attorney, Contractor)

Email or Fax:

Property Information:

Present Use of

Property: Primary residence

Proposed Use of

Property:

Investment in

Property*: \$10,000.00

*Please provide the estimated dollar amount
necessary to complete the proposed project or
implement the proposed use.

Do you:

Own the property? Yes

Lease the property? Term of the lease: _____

Have an offer to purchase the property?

Have another type of interest in the property _____

Petitioner's Signature:

Date: April 19, 2017

Validation for \$100 fee must appear here

Type 0209

Staff Use Only:

Previous BOZA history

at this site:

Lot Area:

Previous case no.

Zoning:

Hearing date

Qtr Section:

Property use changing?

Ald. District:

Is this a new operator?

Please make checks payable to:

"City of Milwaukee"

Note: Depending upon your application,
additional fees may be required prior to your
hearing. For a complete list of fees, please refer
to s.200-33-65 MCO. This application will not be
accepted for review unless the validation block
indicates that the FEE has been paid. ALL FEES
ARE NON-REFUNDABLE.



BOARD OF ZONING APPEALS - CITY OF MILWAUKEE

NOTICE OF APPEAL AND APPLICATION FOR REVIEW

Address of Property: 2522 North Summit Avenue Milwaukee, WI 53211

Petitioner Info

Petitioner Name: Barry M. Cymerman

Mailing Address: 2522 North Summit Avenue

(petitioner must have interest in land)

City / State: Milwaukee, WI

Zip Code 53211

Phone: (414) 745-4262

Email or Fax: barry@pcs-law.net

Contact Info

Primary Contact Barry Cymerman

Mailing Address:

(414) 745-4262

City / State:

Zip Code

Phone:

Email or Fax:

Relationship to
petitioner

(e.g. Architect, Attorney, Contractor)

Property Information:

Present Use of

Property: Primary residence

Proposed Use of

Property:

Investment in

Property*: \$10,000.00

*Please provide the estimated dollar amount
necessary to complete the proposed project or
implement the proposed use.

Do you:

Own the property? Yes

Lease the property? Term of the lease: _____

Have an offer to purchase the property?

Have another type of interest in the property _____

Petitioner's Signature:

Date: April 19, 2017

Validation for \$_____ fee must appear here

Type 0209

Staff Use Only:

Previous BOZA history at this site: _____	Lot Area: _____
Previous case no. _____	Zoning: _____
Hearing date _____	Qtr Section: _____
Property use changing? _____	Ald. District: _____
Is this a new operator? _____	

Please make checks payable to :
"City of Milwaukee"Note: Depending upon your application,
additional fees may be required prior to your
hearing. For a complete list of fees, please refer
to s.200-33-65 MCO. This application will not be
accepted for review unless the validation block
indicates that the FEE has been paid. ALL FEES
ARE NON-REFUNDABLE.

Jill and Barry Cymerman

2522 North Summit Avenue

Milwaukee, WI 53211

Statement of Variance

1. Preservation of Intent:

It is our intent to improve our home by having central A/C installed. We want to place the condenser on the north side of the house, but unfortunately it would be within the City's three foot setback limit. It is therefore our intention to place the condenser behind an existing fence, as this will completely shield the condenser and will not disturb our neighbors.

2. Exceptional Circumstances:

Our house is located on the East Side of Milwaukee where the lots sit very close together. We are limited in where we can place the unit. The electrical workings/boxes sit on the north side of our house and would be the most practical location for the condenser.

3. Preservation of Property Rights:

The chosen location would be ideal because it is not visible to the neighbor (enclosed in an existing fence) and is not visible from the street/sidewalk.

4. Absence of Detriment:

There is an existing fence located on the north side of the house. The unit would be placed inside the fence and therefore would not be seen by the neighbors or the street.

5. Hardship Dimensional Variance:

If granted, it would maintain the integrity of our home without any impairment to our neighbors or the neighborhood.

Address of Parcel: 2522 North Summit Avenue
Milwaukee, WI 53211

Affidavit for the Board of Zoning Appeals

1. POLICY. Each applicant for a zoning map amendment or approval of a planned development, and each applicant for a use variance or special use permit, shall submit to the city plan commission or the board of zoning appeals, as the case may be, a signed affidavit indicating whether the applicant is:
 - a. Delinquent in the payment of any property tax, special assessment, special charge or special tax due to the city, provided that all appeals of the tax, assessment or charge have been concluded or the time to appeal has expired:

No

 - b. A party against whom the city has an outstanding judgment, provided that all appeals of the judgment have been concluded or the time to appeal has expired:

No

 - c. A party against whom the city has outstanding health or building and zoning code violations or orders from the commissioner of health or commissioner of neighborhood services that are not actively being abated, provided that all appeals of orders to correct violations have been concluded or the time to appeal has expired:

No

- d. A party who has been convicted of violating an order of the commissioner of health or commissioner of neighborhood services within the past year, provided that all appeals of the conviction have been concluded or the time to appeal has expired:

No

- e. The owner of a premises found to be in violation of s. 80-10 to whom the commissioner of neighborhood services has charged the costs of police enforcement pursuant to s. 80-10-4, provided that all appeals of these charges have been concluded or the time to appeal has expired:

No

2. NON-INDIVIDUAL APPLICANTS

- a. Corporations. If the applicant is a corporation, a duly authorized officer or director of the corporation shall submit the affidavit required by sub. 1. The affidavit shall attest to whether each officer and director of the corporation as well as each shareholder owning 5% or more of voting stock, fits any of the descriptions in sub. 1-a to e.
- b. Partnerships. If the applicant is a partnership or limited partnership, a duly authorized partner, general partner or limited partner shall submit the affidavit required by sub 1. The affidavit shall attest to whether each partner, general partner and limited partner fits any of the descriptions in sub. 1-a to e.

- c. Limited Liability Companies. If the applicant is a limited liability company, a duly authorized member or manager of the company shall submit the affidavit required by sub. 1. The affidavit shall attest to whether each member and manager of the company fits any of the descriptions in sub. 1-a to e.
- d. Nonstock Corporations. If the applicant is a nonstock corporation, a duly authorized officer or director of the corporation shall submit the affidavit required by sub. 1. The affidavit shall attest to whether each officer and director of the corporation fits any of the descriptions in sub. 1-a to e.

* Please include attachments if space provided is not sufficient

Dated at Milwaukee, Wisconsin, this 19th day of April, 2017.



Petitioner

State of Wisconsin
County of Milwaukee

Subscribed and sworn to before me

This 19th day of April, 2017



Notary Public, State of Wisconsin

My commission expires: permanently

DOCUMENT NO.

STATE BAR OF WISCONSIN FORM 1 - 1982
WARRANTY DEED

THIS SPACE RESERVED FOR RECORDING DATA

REEL 3323 IMAGE 887

6973109

REGISTER'S OFFICE } SS
Milwaukee County, WI - 10 15 AM
RECORDED AT

JUL 5 1994

REEL 3323 IMAGE 887

Name of Grantor REGISTER
OF DEEDS

RETURN TO

Barry Mitchell Cymerman
161 W. Wisconsin Avenue
Milwaukee, WI 53203This Deed, made between Marion Galin, a/k/a Marion S.
Galin, a single individual,Grantor, and Barry Mitchell Cymerman, a single
individual

Grantee,

Witnesseth, That the said Grantor, for a valuable consideration conveys to Grantee the
following described real estate in Milwaukee County,

Tax Parcel No: 318-0161-8

Lot 49, in Block 4, in Gilman's Subdivision of Lots in Lockwood's Addition in the
West 1/2 of the Southeast 1/4 of Section 15, Town 7 North, Range 22 East, in the City
of Milwaukee, County of Milwaukee, State of Wisconsin.

Tax Key No. 318-0161-8

ADDRESS: 2522 North Summit Avenue

DLE/TJJ/JT

TRANSFER
\$ 450.00
FEE

6973109

RECORD 10.00

RTX 450.00

This is homestead property.
Together with all and singular the hereditaments and appurtenances thereunto belonging;

And Marion Galin

warrants that the title is good, indefeasible in fee simple and free and clear of encumbrances except: Municipal and zoning
ordinances and agreements entered under them, recorded easements for the
distribution of utility and municipal services, recorded building and use
and will warrant and defend the same. restrictions and covenants and general taxes levied forDated this 29th day of June calendar year 1994.

(SEAL)

Marion S. Galin

(SEAL)

Marion S. Galin

(SEAL)

(SEAL)

AUTHENTICATION

Signature(s) of Marion S. Galin

ACKNOWLEDGEMENT

STATE OF WISCONSIN

County, } SS.

authenticated this 30th day of June*Morton M. Grodsky*

Morton M. Grodsky

TITLE: MEMBER STATE BAR OF WISCONSIN

if not,

authorized by § 706.06, Wis. Stat.

THIS INSTRUMENT WAS DRAFTED BY

Morton M. Grodsky, Atty. at Law

(Signatures may be authenticated or acknowledged. Both are not necessary.)

Personally came before me this ____ day of

____, 19 ____ the above named

to me known to be the person(s) who executed the foregoing
instrument and acknowledge the same.

Notary Public _____ County, Wis.

My Commission is permanent. (If not, state expiration date:

____, 19 ____.)

001040861

WARRANTY DEED

STATE BAR OF WISCONSIN
Form No. 1 - 1982

(wardccol/113-93)

North
neighbor
house

neighbor's
driveway

existing fence

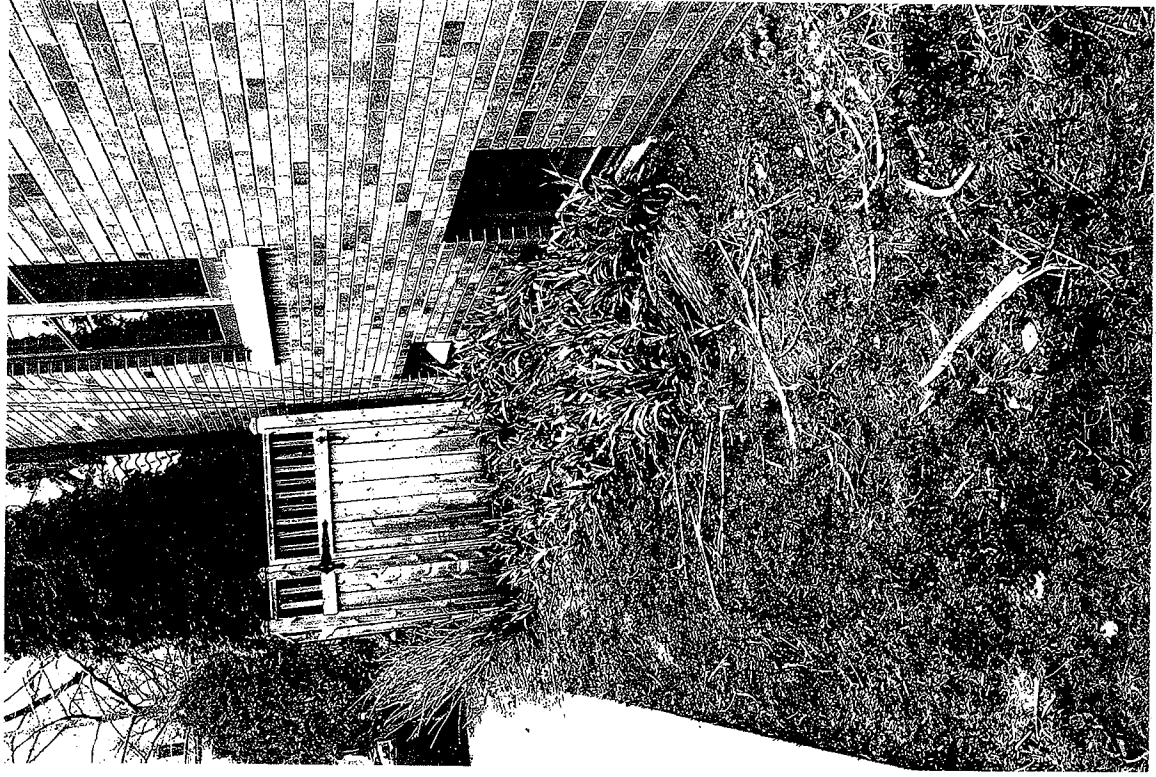
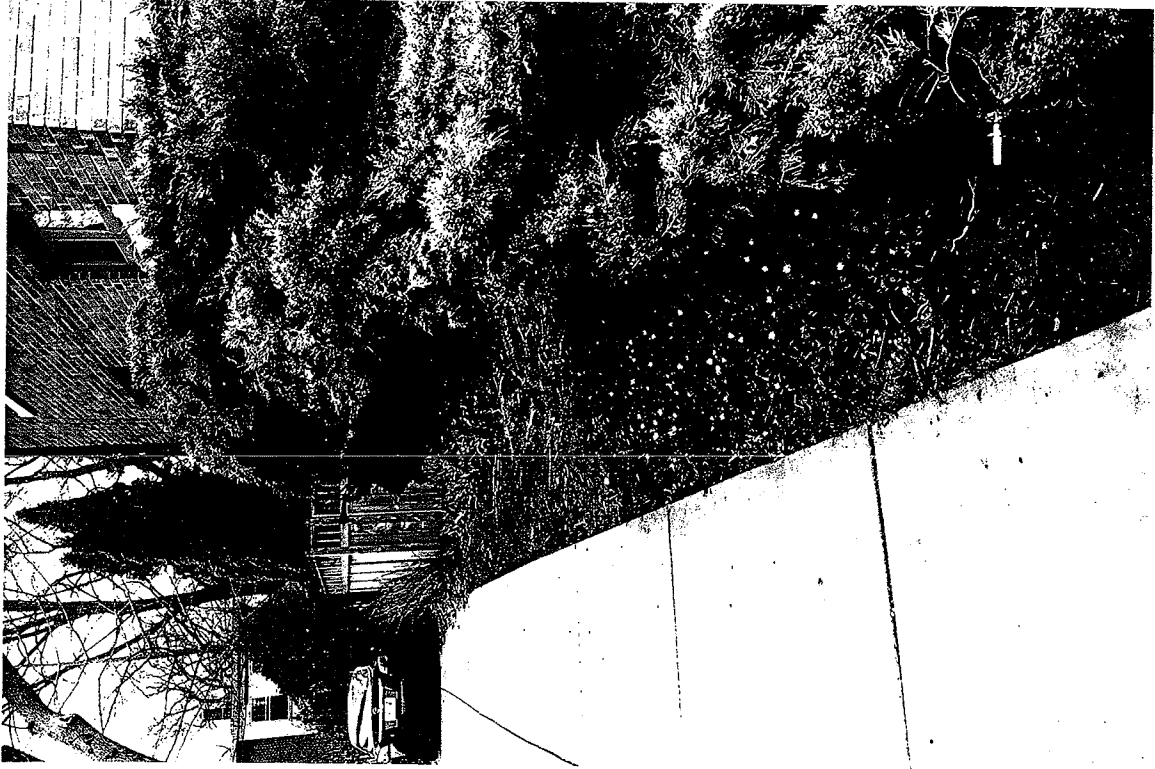
condenser

existing fence

grass

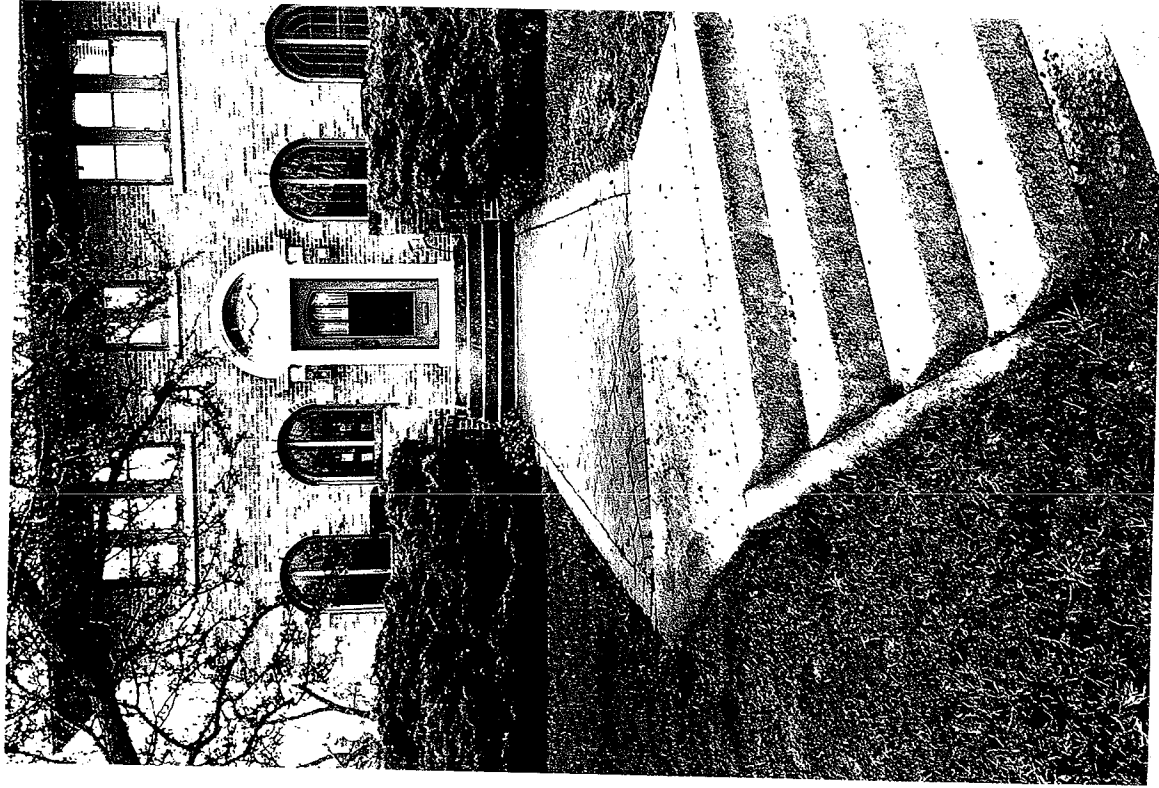
Our house
2522 N. Summit

2522 North Summit Ave



NORTH SIDE OF HOME WITH EXISTING FENCE

2522 North Summit Ave



WEST SIDE OF HOME

