

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)		
	ADDRI	ESS OF PROPERTY: 36 WESTSTATE ST	
2.	NAME AND ADDRESS OF OWNER:		
	Name((s):(DAULD GROSSE	
	Addres	ss:2830 WEST 37ATE ST	
	City: M(LWA UNEE State: W) ZIP: 53208		
		DAU GROSSE @ AOC. COM	
	Teleph	none number (area code & number) Daytime: 4/4-342-470 Evening: SAME	-
3,	APPLICANT, AGENT OR CONTRACTOR: (if different from owner)		
	Name(s): SAME AS ABOUE		
	Addres	ss:	
	City:	State: ZIP Code:	
	Email:		
	Teleph	none 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)		
	Α.	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" \times 17" or 8 $\frac{1}{2}$ " \times 11") A digital copy of the photos and drawings is also requested.	
	way sanana na na na na away na	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.

WOODEN PICKET FENCE

PAGE 85" LEFT IN THE
BOOK LIVING WITH HISTORY

WOODE PICKET FENCE

PANNING FONCE

NO NO PORTY

WE ASE

6. SIGNATURĘ OF APPLICANT:

Signature

Please print or type name

Data

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

hpc@milwaukee.gov

www.milwaukee.gov/hpc

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

SUBMIT