



## 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:**

1033 N Old World Third Street

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

Name(s): Robert L Wiltgen

Address: 1033 N Old World Third Street

City: Milwaukee

State: WI

ZIP: 53212

Email: bobby@oakbarreilmilwaukee.com

Telephone number (area code & number) Daytime: 414-213-6817

Evening:

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

Name(s): *Flox Design*

Address:

City: *Milwaukee, WI*

State: *WI*

ZIP Code: *53203*

Email: *bobby@oakbarreilmilwaukee.com*

Telephone number (area code & number) Daytime: *414-213-6817*

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.

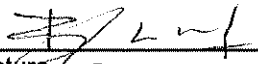
We plan to use the same type of sidewalk cafe as Who's on Third. The project will be completed by Flux Design.

I have enclosed a photo of the patio. We will put down a custom deck for the tables and chairs to screw into.

The deck tables will be made out of painted steel and classically stained Fijian mahogany.

The patio will have a fence on the street side as a barrier for street traffic and also for curb appeal.

6. **SIGNATURE OF APPLICANT:**

  
Signature

  
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**

**[hpc@milwaukee.gov](mailto:hpc@milwaukee.gov)**

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

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

**SUBMIT**





















