

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

mail:  elephone number (area code & number) Daytime:  Evening:  PPLICANT, AGENT OR CONTRACTOR: (if different from owner)  ame(s): Innovative Signs  ddress: 21795 Doral Rd Suite B  ity: Waukesha  State: WI  ZIP Code: 5318  mail:  office@innovative-signs.com  elephone number (area code & number) Daytime: 262-432-1330  Evening:  TTACHMENTS: (Because projects can vary in size and scope, please call the HPC Of t 414-286-5712 for submittal requirements)  REQUIRED FOR MAJOR PROJECTS:  Photographs of affected areas & all sides of the building (annotated photos recon Sketches and Elevation Drawings (1 full size and 1 reduced to 11" x 17" or 8 ½" x A digital copy of the photos and drawings is also requested.  Material and Design Specifications (see next page)	1730 S 13th St		
ddress: 5601 W North Ave  ity: Milwaukee State: WI ZIP: 53208  mail:	NAME AND ADDRESS OF OV	VNER:	
mail:  elephone number (area code & number) Daytime:  Evening:  PPLICANT, AGENT OR CONTRACTOR: (if different from owner)  lame(s): Innovative Signs  ddress: 21795 Doral Rd Suite B  iity: Waukesha  State: WI  ZIP Code: 5318  mail: office@innovative-signs.com  elephone number (area code & number) Daytime: 262-432-1330  Evening:  TTACHMENTS: (Because projects can vary in size and scope, please call the HPC Oft 414-286-5712 for submittal requirements)  REQUIRED FOR MAJOR PROJECTS:  Photographs of affected areas & all sides of the building (annotated photos recon Sketches and Elevation Drawings (1 full size and 1 reduced to 11" x 17" or 8 ½" x A digital copy of the photos and drawings is also requested.  Material and Design Specifications (see next page)  NEW CONSTRUCTION ALSO REQUIRES:	Name(s): Jomela Butters LLC		
mail:  elephone number (area code & number) Daytime:  Evening:  PPLICANT, AGENT OR CONTRACTOR: (if different from owner)  lame(s): Innovative Signs  ddress: 21795 Doral Rd Suite B  iity: Waukesha State: WI ZIP Code: 5318  mail: office@innovative-signs.com  elephone number (area code & number) Daytime: 262-432-1330 Evening:  TTACHMENTS: (Because projects can vary in size and scope, please call the HPC Of t 414-286-5712 for submittal requirements)  REQUIRED FOR MAJOR PROJECTS:  Photographs of affected areas & all sides of the building (annotated photos recon Sketches and Elevation Drawings (1 full size and 1 reduced to 11" x 17" or 8 ½" x A digital copy of the photos and drawings is also requested.  Material and Design Specifications (see next page)  NEW CONSTRUCTION ALSO REQUIRES:	Address: 5601 W North Ave		
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Floor Plans (1 full size and 1 reduced to a maximum of 11" x 17")	ATTACHMENTS: (Because prat 414-286-5712 for submittal real 414	requirements) OR PROJECTS: d areas & all sides of the building n Drawings (1 full size and 1 redu otos and drawings is also reques pecifications (see next page)	g (annotated photos recomme
Site Plan showing location of project and adjoining structures and fences	ATTACHMENTS: (Because print at 414-286-5712 for submittal results of a submittal results of	requirements) OR PROJECTS: d areas & all sides of the building n Drawings (1 full size and 1 redu otos and drawings is also reques pecifications (see next page) NALSO REQUIRES:	g (annotated photos recomme uced to 11" x 17" or 8 ½" x 11 sted.

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 Propose to Install 2 new faces to an existing Projecting Sign.  The sign will be internally Illuminated
Sign Height: 1', Sign Length 3'6" with a total square footage of 3.5 feet Logo: Applied 3M Translucent 'White' Digital Printed vinyl per Logo detail Logo Colors: To Match- Pantone 3275C-' Ascension Green', Pantone 286-'Ascension Green', Pantone
248C- 'Ascension Violet' Copy is surface applied 3M Tanslucent 'white' digitally printed vinyl to match PMS 286C-'Ascension Blue ' Copy style is Whitney Semiblod
Retainer and returns: Painted map to match PMS 286C Ascension Blue' Face is Translucent #7328 'white acrylic' Using Existing Mounting Brackets.

6.	SIGNATURE OF APPLICANT:	
	1.00	
	Mal	

Signature

Nicole Simmerman

Please print or type name

05/01/2018

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

FAXp(40)128648004gov

www.milwaukee.gov/hpc

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

SUBMIT

Sign Recommendation

## Existing

HOG:	OAH:	W.	Ξ	Approx. Size:	Illumination:	Location:	Quantity:	Sign Type:
9.0"		3-6	1:-0"		Internal	Main Entrance	1	Cabinet (Box) Sign



Context

Action:

Replace

Comment:

Make Good



Detail Side A



Detail Side B



Ascension
Seton Dental Clinic

Recommended - Side B



TECHNICAL SURVEY IS REQUIRED PRIOR TO SIGN MANUFACTURING

Cabinet (Box) Sign

Recommended

Approx. Size: Illumination: Attachment: Quantity: Sign Code: Sign Type:

Other

Internal

Comment

Custom cabinet mounted in existing location.

OAH: ≶ ∓