

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review PCEIVED Please print legibly. AUG 10 2018

HISTORIC NAME OF PROPERTY OR HISTORIC DISTRICT: (if known)

ADDRESS OF PROPERTY:

2646 N. Lake Dr.

2. NAME AND ADDRESS OF OWNER:

Name(s):

Tim Nelson

Address:

2646 N. Lake Dr.

City:

Milwaukee

State:

WI

ZIP:

53211

Email:

Telephone number (area code & number) Daytime:

Evening:

961-9667

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

Name(s):

Mike Luethe for Badger Fence

Address:

101 E. Abert Place

City:

Milwaukee

State:

WI

ZIP Code:

53212

Email:

mike@badgerfence.com

Telephone number (area code & number) Daytime: 466-7510

Evening:

ATTACHMENTS: (Because projects can vary in size and scope, please call the HPC Office 4. 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)

В. **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

YOUR APPLICATION CANNOT BE PROCESSED UNLESS **PLEASE NOTE:** BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED

AND SIGNED.

5.	DESCR	RIPTION	OF	PROJ	IECT:
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Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached.

Installation of approx. 44' of 6' high cedar solid universal fence in rear yard.

6. SIGNATURE OF APPLICANT	т.	N	:Δ	IC	21	РÞ	ıΔ)F ₁	: /	R	1	Δ٦	GN.	SI		6
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Signature

Mike Luethe

Please print or type name

8/10/18

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

www.milwaukee.gov/hpc

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

SUBMIT

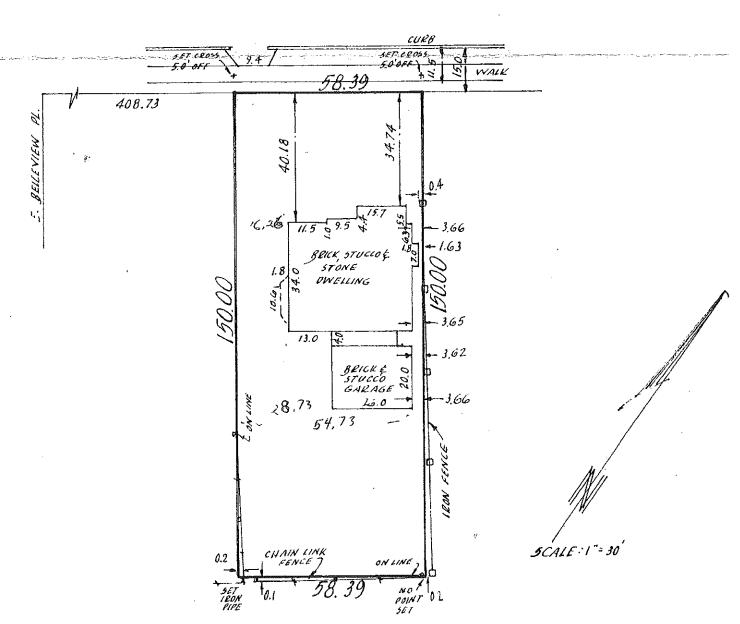
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N.

LAKE

DR.

66 FT.



I Certify that I have surveyed the above described property (Property), and the above map is a true representation thereof and shows the size and location of the Property, its exterior boundaries; the location and dimensions of all visible structures thereon, boundary fences, apparent easements and roodways and visible encroachments, if any. This survey is made for the exclusive use of the present owners of the Property,

This survey is made for the exclusive use of the present owners of the Property and also those who purchase, mortgage, or guarantee the title thereto, within one (1) year from date hereof.

year from date hereat.

Kenneth & Suke

THIS IS ORIGINAL





(6) ____