

## 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) Brewers Hill   |                                |                        |                 |  |  |  |  |  |
|----|---|--------------------------------|------------------------|-----------------|--|--|--|--|--|
|    | ADDRESS OF PROPERTY: 114 W Lloyd St   |                                |                        |                 |  |  |  |  |  |
| 2. | NAME AND ADDRESS OF OWNER: Name(s): Amanda Betts (buyer)  |                                |                        |                 |  |  |  |  |  |
|    | Address: 114 W Lloyd  |                                |                        |                 |  |  |  |  |  |
|    | City: Milwa   | ukee                           | State: WI              | ZIP: 53212      |  |  |  |  |  |
|    | Email: bettsregina83@gmail.com  |                                |                        |                 |  |  |  |  |  |
|    | Telephone   | number (area code & number) D  | aytime: 1-414-345-7661 | Evening: Same   |  |  |  |  |  |
| 3. | APPLICANT, AGENT OR CONTRACTOR: (if different from owner)   |                                |                        |                 |  |  |  |  |  |
|    | Name(s): David Koscielniak  |                                |                        |                 |  |  |  |  |  |
|    | Address: 12310 West Waterford Ave   |                                |                        |                 |  |  |  |  |  |
|    | City: Greenfield  |                                | State: WI              | ZIP Code: 53228 |  |  |  |  |  |
|    | Email: koz@kozitecture.com  |                                |                        |                 |  |  |  |  |  |
|    | Telephone   | number (area code & number) Da | aytime: 414-303-8489   | Evening: same   |  |  |  |  |  |
| 4. | ATTACHMENTS: (Because projects can vary in size and scope, please call the HPC Office at 414-286-5712 for submittal requirements)                   |                                |                        |                 |  |  |  |  |  |
|    | A. RI   | EQUIRED FOR MAJOR PROJECT      | TS:                    |                 |  |  |  |  |  |
|    | 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 ½" 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. DESCR | PTION OF |     | IFAT. |
|----------|----------|-----|-------|
| a uraux  |          | PRU |       |

Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached.

CONSTRUCT A NEW TWO-STORY DETACHED GARAGE ON THE WEST SINE OF THE PROPERTY. ALLEY ACCESS TO THE GARAGE PLUS CONCRETS PARKING SLAB/PATIO ON SOUTH FACE OF GARAGE AT GRADE.

STYLE, MATERIALS AND COLORS TO SIMULATE EXISTING TWO-STORY HOUSE.

| 6. | SIGN | ATL | JRE | OF | APPI | LICANT: |
|----|------|-----|-----|----|------|---------|
|----|------|-----|-----|----|------|---------|

Signature

Amanda Betts

08-31-18

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.

## Mail or Email Form to:

Historic Preservation Commission City Clerk's Office 841 N. Broadway, Rm. B1 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