



Jim Owczarski
City Clerk
jowcza@milwaukee.gov

Richard G. Pfaff
Deputy City Clerk
rpfaff@milwaukee.gov

Office of the City Clerk

September 21, 2016

CERTIFIED MAIL

J. Kesselman
1125 Mitchell, LLC
1135 W. Historic Mitchell St.
Milwaukee, WI 53204

Tom Vavra
PO Box 70087
Milwaukee, WI 53207

RE: Resolution relating to a Certificate of Appropriateness for an elevator tower addition to 1135 W. Historic Mitchell Street in the Historic Mitchell Street Historic District for 1125 Mitchell LLC.

Dear Applicants:

You recently submitted an application for the above listed Certificate of Appropriateness.

A public hearing has been scheduled for Monday, October 10, 2016 at 3:00 p.m. in City Hall, 200 East Wells Street, Room 301-A to determine whether or not to grant the requested Certificate of Appropriateness. You or employees designated by yourself will be given an opportunity to speak at this hearing.

If you have any questions relating to the hearing process, please contact Linda Elmer at 414-286-2231.

Sincerely,

James Owczarski
City Clerk



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to: J. Kesselman 1125 Mitchell, LLC 1135 W Historic Mitchell Milwaukee WI 53204</p>		<p>A. Signature <input checked="" type="checkbox"/> X</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label) 7012 3460 0000 0488 4197</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p>	
<p>PS Form 3811, February 2004</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

7012 3460 0000 0488 4180

U.S. Postal ServiceTM **CERTIFIED MAILTM RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	\$ 160729
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here 9/21

Sent to: Tom Vavra
Street, Apt. No.: PO Box 70087
or PO Box No.: 53207
City, State, ZIP+4: Milwaukee, WI 53207

PS Form 3800, August 2006 See Reverse for Instructions

7012 3460 0000 0488 4197

U.S. Postal ServiceTM **CERTIFIED MAILTM RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage	\$ 160729
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here 9/21

Sent to: J. Kesselman
Street, Apt. No.: 1135 W Historic Mitchell
or PO Box No.: 53204
City, State, ZIP+4: Milwaukee, WI 53204

PS Form 3800, August 2006 See Reverse for Instructions