

## 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)  Sherman Boulevard  |   |                                   |                 |  |  |  |  |  |
|----|--|---|-----------------------------------|-----------------|--|--|--|--|--|
|    | ADDRESS OF PROPERTY: 2853 N Sherman Boulevard  |   |                                   |                 |  |  |  |  |  |
| 2. | NAME AND ADDRESS OF OWNER:   |   |                                   |                 |  |  |  |  |  |
|    | Name(s): Charles Sheppard  |   |                                   |                 |  |  |  |  |  |
|    | Address: 2853 N Sherman Boulevard  |   |                                   |                 |  |  |  |  |  |
|    | City:  | Milwaukee   | State: W                          | ZIP: 53210      |  |  |  |  |  |
|    | Email  | Email:  |                                   |                 |  |  |  |  |  |
|    | Telep  | Telephone number (area code & number) Daytime: 414-435-4605 Evening:  |                                   |                 |  |  |  |  |  |
| 3. | APPLICANT, AGENT OR CONTRACTOR: (if different from owner)  |   |                                   |                 |  |  |  |  |  |
|    | Name(s): Affordable Heating & A/C, Inc   |   |                                   |                 |  |  |  |  |  |
|    | Address: 4630 S Kinnickinnic Avenue  |   |                                   |                 |  |  |  |  |  |
|    | City: Cudahy   |   | State: WI                         | ZIP Code: 53110 |  |  |  |  |  |
|    | Email: kathy@affordablehtg.com   |   |                                   |                 |  |  |  |  |  |
|    | Telep  | hone number (area cod   | e & number) Daytime: 414-481-2727 | 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 ½" x 11") A digital copy of the photos and drawings is also requested.  |   |                                   |                 |  |  |  |  |  |
|    | Earline contact with a recognition of the contact o | 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 have been contracted by SDC to replace the upper unit's furnace with a +90% gas furnace that requires PVC venting out the side wall of the home. Due to the location of the current furnace in the basement we will need to vent the pipes out the south side of the home. The placement of the PVC pipes for the upper unit will be not seen from the side since they will be hidden by the outcropping of the front of the home. Please see picture with marked location. We will also paint the PVC pipes on the exterior to match the home's exterior.

Please note: the home already has the first floor furnace venting out the north side of the home that was installed previously.

| 6. | <b>SIGNA</b> | TURE | OF A | <b>APPL</b> | ICANT: |
|----|--------------|------|------|-------------|--------|
|----|--------------|------|------|-------------|--------|

Signature

Kathleen Rasmussen

9/26/2018

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

FAXp(404)il288.i869.4jov

www.milwaukee.gov/hpc

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

