

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

NAME AND ADDRESS OF OWNER: Name(s): Jeffrey and Susan Teerink Address: 1910 N 2nd St City: Milwaukee								
Address: 1910 N 2nd St								
		Name(s): Jeffrey and Susan Teerink						
City: Milwaukee								
	State: WI	ZIP: 53212						
Email: steerink@att.net								
Telephone number (area code & number	) Daytime: 414-288-1583	Evening: 414-614-2585						
City: willwaukee  Email: trafton_tim@yahoo.com	State: W	ZIP Code; 55200 1						
Name(s): Washington Heights Woodworking  Address: 1526 N 50th Place								
	State: WI	ZIP Code: 53208 :						
Email: trafton_tim@yahoo.com								
Telephone number (area code & number	) Daytime: 414-350-7647	Evening: 414-350-764						
	n vary in size and scope, p nts)							
Telephone number (area code & number  ATTACHMENTS: (Because projects car at 414-286-5712 for submittal requiremer	n vary in size and scope, poits)  ECTS:	lease call the HPC Office						
Telephone number (area code & number  ATTACHMENTS: (Because projects car at 414-286-5712 for submittal requirement  A. REQUIRED FOR MAJOR PROJ	n vary in size and scope, points)  ECTS:  all sides of the building (as (1 full size and 1 reduced	nnotated photos recommended to 11" x 17" or 8 ½" x 11")						
ATTACHMENTS: (Because projects car at 414-286-5712 for submittal requirement A. REQUIRED FOR MAJOR PROJ  Photographs of affected areas & Sketches and Elevation Drawings	n vary in size and scope, points)  ECTS:  all sides of the building (as (1 full size and 1 reduced drawings is also requested	nlease call the HPC Office  nnotated photos recommended to 11" x 17" or 8 ½" x 11")						
ATTACHMENTS: (Because projects car at 414-286-5712 for submittal requirement A. REQUIRED FOR MAJOR PROJ  Photographs of affected areas & Sketches and Elevation Drawings A digital copy of the photos and compared to the second s	n vary in size and scope, ponts)  ECTS: all sides of the building (as (1 full size and 1 reduced drawings is also requested as (see next page)	nlease call the HPC Office  nnotated photos recommended to 11" x 17" or 8 ½" x 11")						

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,

A. Add a bathroom exahust fan vent to meet code. Vent will be through existing soffit on the rear of the

and dimensions. Additional pages may be attached via email.

property (east side).

		B. Add a stove vent hood ex upper brick wall on the rear of	ahust fan in the upper k of property (east side).	itchen. Vent will be 6-8 in	ches in diameter through	ו
					2	
6.	SIGNA	TURE OF APPLICANT:				
	Signati	ure Jack	<del></del>			
	Susan	Teerink		4/29/2019		
		print or type name		Date		
		I supporting documentation				
		d at the next Historic Preser				
the me	eting will	not be considered by the C	commission during the	eir deliberation. Please (	caii it you nave any qu	estions and

Mail or Email Form to:

staff will assist you.

Historic Preservation Commission City Clerk's Office 841 N. Broadway, Rm. B1 Milwaukee, WI 53202

PHONE: (414) 286-5712 or 286-5722

hpc@milwaukee.gov

www.milwaukee.gov/hpc

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



1910 N 2nd St Front of property facing West

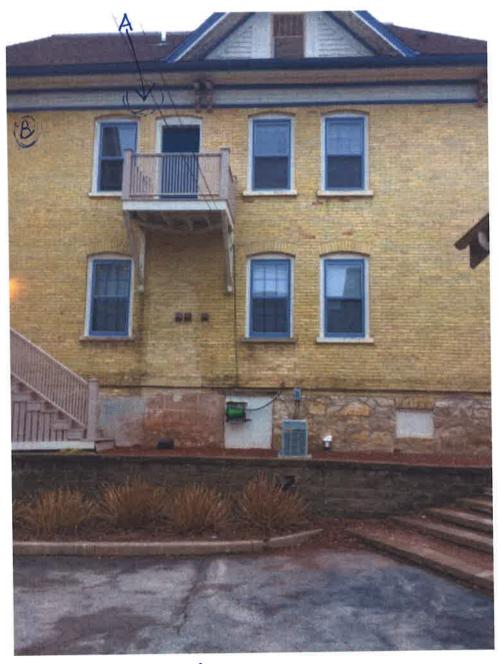


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1910 N 2nd St South Side of property



1910 N 2nd 87 Rear of property facing East

A. approximate location of exhaust form in existing softit. See page 5.

B. approximate location of Stone vents. Scapage 6

A. Enlarged photo indicating location of both mon exhaust fan vent.

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B. Enlaughd photo indicating locations of Store extremes for wert.

