

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

	2617 N. GRAN	It Blud	
NAN	ME AND ADDRESS OF OWN	ER:	
Nam	ne(s): Koger f.	Williams	
Addı	ress: 2617 N	GRANT Bluck	,
City:	MILWAOKEE	State: W.J.	ZIP: <u>53210</u>
Ema	il: WILT4 WIL.@	ythoo, com	
Tele	phone number (area code & r	/ number) Daytime: <u>/タ/レ)</u> 多0	7-1138 Evening: 414-867
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PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS

<u>BOTH PAGES</u> 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 via email.

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6. SIGNATURE OF APPLICANT:

Signature

Roger F. Williams

Date 6/12/19

This form and all supporting documentation MUST arrive by 4:00 pm (11:59 pm via email) 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) 286-5712 or 286-5722

hpc@milwaukee.gov

www.milwaukee.gov/hpc

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

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