

## CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

2756	RESS OF PROPERTY:		
2730	N Grant Blvd, Milwaukee, WI 53210		
NAM	E AND ADDRESS OF OWNER:		
Name	e(s):Bethany Yeo		
Addre	ess: 5916A W Michigan Street		
City:	Vauwatosa	State: WI	ZIP: 53213
Email	. yeo_b@ymail.com		
Telep	hone number (area code & number	r) Daytime: 4149020829	Evening: same
APPL	ICANT, AGENT OR CONTRACTO	OR: (if different from owner)	
Name	e(s):		
Addre	ess:		
City:_		State:	ZIP Code:
Email	:		
Telep	hone number (area code & number	r) Daytime:	Evening:
ATTA	CHMENTS: (Because projects ca	n vary in size and scope, plo	-
<b>ATTA</b> at 414	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme	n vary in size and scope, plents)	-
ATTA	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme REQUIRED FOR MAJOR PRO	n vary in size and scope, plonts)  JECTS:	ease call the HPC Office
<b>ATT</b> at 414	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme REQUIRED FOR MAJOR PRO Photographs of affected areas &	n vary in size and scope, plonts)  JECTS:  a all sides of the building (an	ease call the HPC Office
<b>ATTA</b> at 414	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme REQUIRED FOR MAJOR PRO	n vary in size and scope, plants)  JECTS:  all sides of the building (and sides)	ease call the HPC Office
<b>ATTA</b> at 414	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme REQUIRED FOR MAJOR PRO.  Photographs of affected areas & Sketches and Elevation Drawing	n vary in size and scope, plants)  JECTS:  all sides of the building (and sides)  gs (1 full size and 1 reduced drawings is also requested.	ease call the HPC Office
<b>ATTA</b> at 414	ACHMENTS: (Because projects ca 4-286-5712 for submittal requireme REQUIRED FOR MAJOR PRO Photographs of affected areas & Sketches and Elevation Drawing A digital copy of the photos and	n vary in size and scope, plants)  JECTS:  a all sides of the building (and gradient)  gs (1 full size and 1 reduced drawings is also requested.  ans (see next page)	ease call the HPC Office

PLEASE NOTE: YOUR APPLICATION CANNOT BE PROCESSED UNLESS
BOTH PAGES OF THIS FORM ARE PROPERLY COMPLETED
AND SIGNED.

## 5. **DESCRIPTION OF PROJECT:**

		and dimensions. Additiona	il pages may be attached via	email.	
		Hello,			
		One of the corbels needs to or person(s) who make these	be repaired/replaced in the front etypes of repairs/replacements v	of home. Also, names of companies and / would be great.	
		Thank you, Bethany Yeo			
6.	SIGNA	TURE OF APPLICANT:			
	Signature				
	Please	print or type name	Date		
This for	m and all	supporting documentation	MUST arrive by 4:00 pm (11	:59 pm via email) on the deadline date	established
				Any information not provided to staff in	
	_	· · · · · · · · · · · · · · · · · · ·	commission during their delibe	eration. Please call if you have any que	stions and
	l assist yo				
Historic City Cl 841 N.	erk's Offi	ration Commission ce ay, Rm. B1			
		286-5712 or 286-5722	hpc@milwaukee.gov	www.milwaukee.gov/hpc	

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

**SUBMIT** 

Tell us what you want to do. Describe all proposed work including materials, design,

6/22/12