

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review. Please print legibly.

oing with history HIST	IORIC NAME OF PROPERTY OR HIST	ORIC DISTRICT: (if kn	nown)	
	plas S. Thelen House			
ADD	RESS OF PROPERTY:			
2756	6 N Grant Blvd, Milwaukee, WI 53210			
NAN	IE AND ADDRESS OF OWNER:			
Nam	me(s):Bethany Yeo			
Addr	ress: 5916A W Michigan Street			
City:	Wauwatosa	State: WI	ZIP: 53213	
Ema	il: yeo_b@ymail.com			
Tele	phone number (area code & number) D	aytime: 4149020829	Evening: Same	
APP	LICANT, AGENT OR CONTRACTOR:	(if different from owner)		
Nam	ame(s):			
Addr	ress:			
City:		State:	ZIP Code:	
Ema	il:			
Tele	phone number (area code & number) D	aytime:	Evening:	
	ACHMENTS: (Because projects can va I4-286-5712 for submittal requirements)		ease call the HPC Office	
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.			
	Material and Design Specifications (see next page)			
В.	NEW CONSTRUCTION ALSO REQUIRES:			
	Floor Plans (1 full size and 1 reduce	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 via email.

Hello,

My front/back doors need to be replaced and/or repaired. Both the security doors and inside doors. Possibly door frames as well as they are in pretty bad shape.

6. SIGNATURE OF APPLICANT:

Bethouny yes

Signature

Bethany Yeo

Please print or type name

07/08/2020

Date

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.

