

CERTIFICATE OF APPROPRIATENESS APPLICATION FORM

Incomplete applications will not be processed for Commission review.

Please print legibly.

	RESS OF PROPERTY: W. Kilbourn		
NAM	E AND ADDRESS OF OWNER:		
Name	e(s):Kokugonza Kaijage		
Addre	ess: 3115 W. Kilbourn		
City: _	Milwaukee	State: WI	ZIP: <u>53208</u>
Email	kokugonza.kaijage@gmail.com		
Telep	hone number (area code & number) Da	aytime: 7088331083	Evening:
	e(s):		
Auuic			
City:			
•		State:	ZIP Code:
Email		State:	ZIP Code:
Email Telep ATTA at 414	l:	State:aytime:ry in size and scope, p	ZIP Code: Evening: lease call the HPC Office
Email Telep ATTA at 414	chone number (area code & number) Date of the	State:aytime: ry in size and scope, p TS: sides of the building (a full size and 1 reduced	ZIP Code: Evening: lease call the HPC Office nnotated photos recommen to 11" x 17" or 8 ½" x 11")
Email Telep	hone number (area code & number) Date of the n	State:aytime: ry in size and scope, p TS: sides of the building (a full size and 1 reduced wings is also requested.	ZIP Code: Evening: lease call the HPC Office nnotated photos recommen to 11" x 17" or 8 ½" x 11")
Email Telep ATTA at 414	hone number (area code & number) Date of the n	State:aytime: ry in size and scope, p TS: sides of the building (a full size and 1 reduced wings is also requested see next page)	ZIP Code: Evening: lease call the HPC Office nnotated photos recommen 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.

Tell us what you want to do. Describe all proposed work including materials, design, and dimensions. Additional pages may be attached via email.				
My garage collapsed in February and I proceeded to get it demolished. In the mean time, I'd like to build a wooden fence as people have been walking through my yard like it's public property. The fence will cover up where the garage wall used to be and it will be wooden and match the preexisting frence on the other side of my property.				

6.	SIGNATURE OF APPLICANT:		
	Signature D		
	Kokugonza Kaijage	5/1/21	
	Please print or type name	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.

