



LANDMARKS COMMISSION APPLICATION

Monthly meeting is scheduled the first Wednesday of every month.

Application Deadline is 4:30 p.m. on the Monday of the week before the Landmarks Commission meeting (typically the last Monday of every month).

Date Received: _____

Paid: _____ Rec'd. By _____

Trakit #: _____

I am applying for a:

- ☒ Certificate of Appropriateness (COA) - **\$15 application fee required.**
☒ Paint and Repair Grant (no fee)

A. General Information:

Applicant Name: Kevin Lipinski

Phone-Home: 262.933.5742

Phone-Work: _____

E-mail: Kevin.lipinski@wilkie-sanderson.com

Mailing Address: 114 N. James St Waukesha, WI 53186

B. Income Level Information: (Required only for those applying for a LCP & R Grant.)

Based on the following chart, CHECK ONE OF THE BOXES BELOW to INDICATE WHETHER YOUR FAMILY INCOME IS ABOVE OR BELOW THE GUIDELINE amount for your household:

No. in Family	Income Level (Up to:)	No. in Family	Income Level (Up to:)
1.....	\$37,650	5.....	\$58,050
2.....	\$43,000	6.....	\$62,350
3.....	\$48,400	7.....	\$66,650
4.....	\$53,750	8.....	\$70,950

☒ Income is **Above** Guidelines

☐ Income is **Below** Guidelines

Please note: income information is for CBDG reporting only and is not used to determine whether applicants qualify for grant money.

C. Architectural Information on Property (if unknown you may leave this section blank):

Historic Name of Building: _____

Address of Historic Property: _____

Construction Date/Era: _____

Architectural Style: _____

Historic Background (Brief): _____

PLEASE READ AND SIGN: The information in this application is accurate to the best of my knowledge. I agree to supply any relevant documentation that is required for the proper review of this application and I understand that any missing or incomplete information may delay the review process. By signing this I also authorize the City of Waukesha or its agents to enter upon my property for the purpose of reviewing this application.

Signed: Kevin Lipinski Date: 6.24.21

We recommend reading the Landmarks Commission Design Policies and/or discussing your plans with staff before submitting your application. The Design Policies are available here: <https://waukesha-wi.gov/171/Landmarks-Commission>.

D. Nature of Intended Repair(s)/Proposed Work:

Briefly and accurately describe type and location of proposed work on primary building, carriage house, outbuildings (i.e.: garage), fences (including retaining walls), paved surfaces and landscaping. Attach extra sheets and supplemental material as requested in the criteria checklist found in Section E. Be sure to reference the attached Exhibit A, which summarizes the guidelines from the Secretary of Interior's Standards for Historic Preservation Projects. Your narrative must address any of the following elements related to your project:

Roof: Repair or replacement? <u>Replacement</u> Soffits, Fascia, Downspouts _____ Eaves, Gutters _____ Shingle type/style/color _____ <u>Atlas Pristine Heather</u> Siding: Repair or replacement? _____ Paint Colors, Materials _____ Shingling and Ornamentation/Stickwork _____	Chimney(s): Repair or replacement? <u>Removal</u> Flashing _____ Tuckpointing _____
Other Exterior Repairs: _____ Awnings _____ Brickwork/Stonework _____ Cresting _____ Doors _____	Windows: Repair or replacement? _____ Materials, Other _____
Porch: Repair or replacement? _____ Front or Side, Rear _____ Ornamentation _____ Finials, Other _____	Foundation: Extent of repair _____ Tuckpointing _____ Other _____
	Miscellaneous: _____ Landscaping _____ Fences _____ Paving/Brick Pavers _____

Details: Remove 1 layer shingle. Replace with new
slight shadow shingles. Replace rot pc. as needed.
Request removal of chimney

Estimated start date: Now

Estimated completion date: ~ 7/30/21

I/We intend/have already applied for the state's preservation tax credits: ___ Yes ☒ No

Status: _____

Have you done any previous restoration or repair work on this property?

___ No ☒ Yes If yes, what has been done?

Remove shingle siding. Restore original wood siding.
Replace windows with wood dbl. hung inserts. Typ all except
front large window facing the street

Are you aware of any significant alterations or restoration done by previous owners?

☒ No ___ Yes If yes, what has been done?

Are any further repairs or alterations planned for this building for the future?

☒ No ___ Yes If yes, please describe:

E. Criteria Checklist:

REQUIRED FOR ALL PROJECTS

- ☒ Photographs of affected areas and existing conditions from all sides
- ☒ Historic plans, elevations or photographs (if available)
- ☒ Material and design specifications, including samples and/or product brochures/literature when appropriate

REQUIRED FOR ALL PROPOSED NEW CONSTRUCTION, ADDITIONS, EXTERIOR ALTERATIONS, FENCING AND LANDSCAPING

- ___ Site and/or elevation plan – to scale
 (required for all new construction or proposed additions)

REQUIRED FOR EXTERIOR PAINT WORK

- ___ Color samples (including brand of paint and product ID number) and placement on the structure

REQUIRED FOR ALL LCP&R APPLICATIONS

Provide a detailed cost estimate for these repair(s), based on the number of gallons of paint, the amount of lumber, or the number of panes of glass, etc. Be certain to separate material costs from labor. Include a written estimate(s) if available:

Roof estimate attached