NOTICE

A meeting of the City of Evansville Historic Preservation Commission will be held on the date and at the time stated below. Notice is further given that members of the City Council and the Park Board might be in attendance. Requests for persons with disabilities who need assistance to participate in this meeting should be made by calling City Hall: (608)-882-2266 with as much advance notice as possible. Please silence cell phones and electronic devices during the meeting.

City of Evansville **Historic Preservation Commission** Regular Meeting Wednesday, October 23rd, 2024 3rd Floor, City Hall, 31 S. Madison Street, Evansville, WI 53536 6:00 p.m.

- 1. Call to Order
- 2. Roll Call
- 3. Motion to approve the agenda.
- 4. Motion to waive the reading of the September minutes and approve them as printed.
- 5. Civility reminder
- 6. Citizen appearances
- 7. Action Items
 - A. 109 S First Remove and Replace Addition in Rear Yard (HPC-2024-35)
 - B. 39 W Liberty Restore Wooden Porch Railings on Roof Overhang (HPC-2024-39)
 - C. 39 W Main Replace Exterior Door at Eager Free Public Library (HPC-2024-41)
- 8. Discussion Items
- 9. Report of the Community Development Director
 - A. Staff Issued Certificates of Appropriateness
 - i. 109 S First -New Fence (part of HPC-2024-35)
 - ii. 303 W Main Replace Wood Joists, Floorboards, Stringers, Stairs with Same Materials (HPC-2024-38)
 - iii. 109 S Madison Reroof with same materials (HPC-2024-40)
- 10. Correspondence, Comments and Concerns
- 11. Next Meeting Date: November 20th, 2024, 6:00 p.m.
- 12. Motion to Adjourn.

City of Evansville Historic Preservation Commission Regular Meeting Wednesday, September 18, 2024 at 6:00 p.m. 3rd Floor, City Hall, 31 S. Madison Street, Evansville, WI 53536

MINUTES

1. Call to Order. Stephans called the meeting to order at 6:00 pm

2. Roll Call:

| Members | Present/Absent |
|-----------------------|-----------------------|
| Chair Dan Stephans | Р |
| Vice-chair Gene Lewis | Р |
| Vacant | |
| Katie Sacker | Р |
| Norman Barker | Р |
| Amy Corridon | Р |
| Steve Christens | Р |

Others Present Colette Spranger, Community Development Director

- 3. <u>Motion to approve the agenda by</u> Christens, second by Barker, striking 7D. Motion carried unanimously.
- 4. <u>Motion to waive the reading of the minutes from the August 21st, 2024 meeting and approve them as printed.</u> Motion by Lewis, seconded by Christens, motion carried unanimously.
- 5. Civility Reminder. Stephans noted the City's commitment to civil discourse.
- 6. Citizen appearances and Public Presentations.

7. Applications – Action Items:

A. 19 S Third – Construct Log Cabin Shed (HPC-2024-26)

<u>Motion remove the application from the table.</u> Motion by Sacker, seconded by Christens, motion carried unanimously.

Applicants not present. At the last meeting the commission had asked for asphalt shingles instead of the roofing proposed in the application. Applicants were okay with asphalt and sent photos of the same shingles on their roof of the residence as samples.

<u>Motion to approve the application with asphalt shingles.</u> Motion by Sacker, seconded by Christens, motion carried unanimously.

B. 109 S First – Remove and Replace Addition in Rear Yard, Replace Fence (HPC-2024-35)

Applicant not present. Spranger described the application. Christens and Stephans expressed that they would like to see materials and style for the deck prior to approval. Stephans expressed that the door and window appear to be original, and he is opposed to replacing them.

<u>Motion to table application.</u> Motion by Stephans, seconded by Corridon. Motion carried unanimously.

C. 236 W Main – New Wood Picket Fence (HPC-2024-36)

Applicant not present. Spranger described the application. Discussion was held regarding the materials for the gutters and the placement of the fence.

Motion to approve the application as printed. Motion by Christens, seconded by Barker.

Motion carried unanimously.

8. Discussion Item

A. Archaeology Crew

Crews from SHPO are conducting digs along Madison St as part of the DOT's 2028 repair project of Madison St.

9. Report of the Community Development Director A. Staff Approved Certificates of Appropriateness

- i. 23 S Second Reroof with same (HPC-2024-34)
- 10. Correspondence, Comments and Concerns
 - **A. Eager Free Public Library Building Assessment** There has been some water damage from improperly installed rubber roof.
- **11. Next Meeting Date:** October 16, 2024 @ 6:00 p.m.

12. <u>Motion to Adjourn by Christens, second by Sacker. Motion carried unanimously.</u>

Application No.: HPC-2023_____ Agenda Item:



This is a request for issuance of a Certificate of Appropriateness (COA) by the Historic Preservation Commission (HPC) for work proposed to be performed on the exterior of a structure located in any Historic District or designated by the State or City as a historic building or historic site. Complete all sections of this form – it is used to determine if the proposal should be reviewed by staff or the HPC. Submit questions or completed applications to address above, or via email to the Community Development Director, Colette Spranger, at: (608)-882-2263 or colette.spranger@ci.evansville.wi.gov.

| SECTION | APPLICANT and/or OWNER INFORMATION | HISTORIC PROPERTY INFORMATION |
|---------|-----------------------------------------------------|-----------------------------------------------|
| | Applicant Name: Skyler Mullen | Historic Property Address: |
| | | 109 5 1st Street |
| | Applicant Mailing Address: | Evansville, WI 53536 |
| | 109 S 15t St | The following information is available on |
| | Evansville WI 53536 | the property's tax bill: |
| | Applicant Phone: 608 751 2669 | Parcel Tax ID Number: 222 <u>00117</u> 7 |
| | Applicant Email: Skyler 123777@ hotmail. | Parcel Number: 6-27-174 |
| | If different from above, please provide: <i>Cor</i> | The following information is available by |
| | Owner Name: | searching the property address |
| | Owner Address: | at <u>www.wisconsinhistory.org/records</u>): |
| | | Historic Property Name: N/A |
| | | |
| | Owner Phone: | AHI Number: 84979 |
| | Owner Email: | Contributing: Y or N |

INSTRUCTIONS: Complete this entire form and submit by mail or email the following:

1. Application Form with attachments (as outlined in Section 3C and 5):

- Clear photo(s) of every portion of the property that will be affected by the work
- Historic photograph(s) (if available)
- Exterior elevations or sketches of existing conditions and proposed work
- o Samples or specifications of proposed materials
- o If Section 3B applies, evidence of un-reparability
- Site plan (if applicable)
- o Print or PDF of State of WI historic property information, available by searching the property address at www.wisconsinhistory.org

2. Building Permit (work cannot begin until Building Inspector has approved a Building Permit) All applications are to be submitted and deemed complete at least 10 days prior to the HPC meeting. HPC typically meets on the third Wednesday of each month at 6:00pm in City Hall. Applicants are encouraged to appear in person.

| Thank you for helping | to value and j | orotect "one of the mo | ost intact nineteenth cent | ury townscapes | In southern Wisconsin" |
|-------------------------|----------------|------------------------|----------------------------|-----------------|------------------------|
| and "the linest collect | ion of 1840s - | 1915 arehitecture of a | ny small fown in Wiscons | in" – Wisconsin | State Historic Society |
| SUBMITTED BY: | 16-11 | 1/1 | | DATE: | 9/1/24 |
| // | | Swner or Applicar | nt Signature | | //// |

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SECTION PROPOSED WORK CHECKLIST

2

Please check all boxes that apply and provide more detail in Sections 3 and 4:

| Worl | k Category | Work Category Details |
|----------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| □ Roofing | Replacement Minor repair | Shingles only Soffit, fascia, or trim work Matching existing materials Change of materials (EG, replacing asphalt with metal) |
| Gutters | New or repair Replacement Removal | Change of materials Match existing historic materials (metal, etc.) Use new modern materials (vinyl, etc.) |
| 3 Siding | Minor repair Replacement | Change of materials Match historic materials (wood, cement board, etc.) Use modern materials (plastic, vinyl aluminum, etc.) |
| Exterior windows and doors | Add new Replacement Removal | Change in dimension or location (height, length) Match historic materials (wood, metal, glass, etc.) Use modern material (plastic, vinyl, aluminum, etc.) Removal, covering or alteration of original trim |
| - Fences | ✓ New □ Repair □ Replacement | Use new modern materials (vinyl, aluminum, etc.) Matching historic materials (wood, stone, etc.) |
| Porch | Minor repair Replacement Removal Add new | Match historic material (wood, metal, etc.) Use new modern material (plastic, vinyl, aluminum, etc.) Column, railing, or skirting Decking |
| Sidewalk or paving | New Repair Replacement | Recreating Matching existing materials Other: |
| New construc- tion | Addition New building Façade alter- ation | Recreating missing architectural features Removing architectural features Other: |
| Signage and exterior lighting | New Repair Replacement | Signage (Complete Sign Permit Application instead). Lighting New alternative materials Matching existing materials |
| 」 Other | New Repair Replacement Removal | New modern materials Match existing materials Removal or altering of original architectural details |

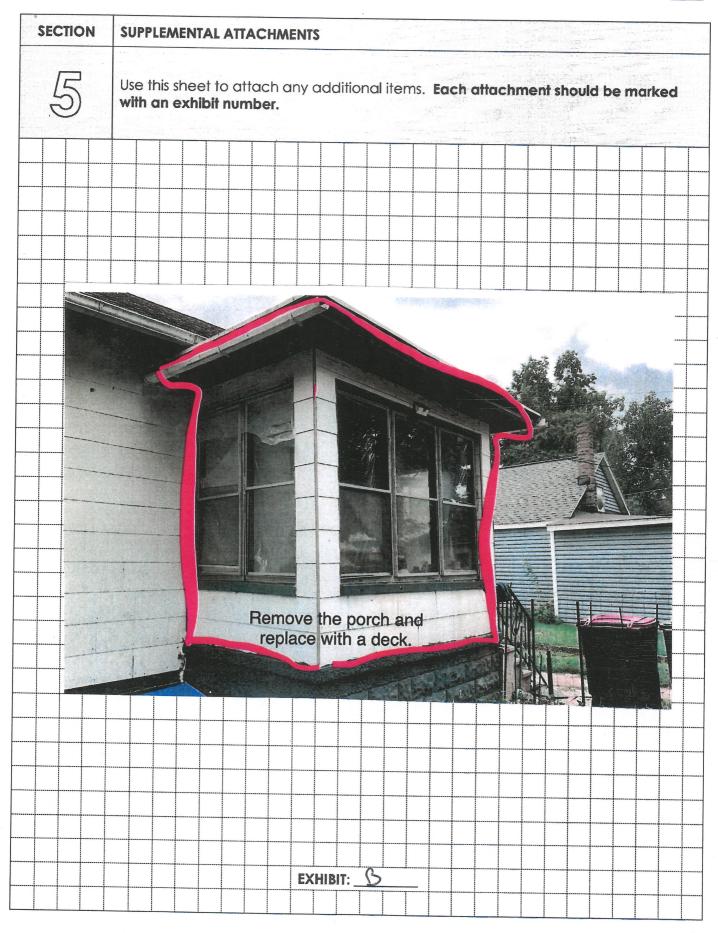
| SECTION | PROPOSED WORK SUMMARY |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3 | 3A For each Item that was checked in the left-hand column of Section 2, provide a more detailed description of the work proposed to be done: Removing clamaged muck room, aciding 4 ft deck of a back of the more detailed description of the work proposed to be done: Removing clamaged muck room, aciding 4 ft deck of the back of t |

| SECTION | SUPPLEMENTAL QUESTIONS |
|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | 4A Will the proposed work alter any of the distinctive features or historic architectural details of the property? |
| Ą | 4B Please briefly describe how the proposed work will conform to the Standards and Guidelines of the Secretary of the U. S. Dept. of the Interior for the Rehabilitation of Historic Properties (available at www.nps.gov/tps/standards/rehabilitation.htm and at City Hall.) Adherence to these standards and guidelines will help assure your property's eligibility for potential State and Federal tax credits. By Keeping Overall look of the bouses historic Constraint Brick base of mud room to be used as a base for the wooden deck. Brick itself is solid; the walls and flooring above it is not in good condition. Applicant has decided to forgo the window and door replacement at this time. -Notes by CHS, 10/22/24 4C Have you submitted this project for state or federal tax credits? |

| project address <u>109</u> S1 | st St Evansville | ,WI | PERMIT # | |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------|---------------------------------|
| PROJECT DESCRIPTION: Add Fence, remov | e damaged mud i | coom, upolate Kitchen Counters | PARCEL #: TAX ID #: | |
| 1839 | TY OF EVANSVILLE 31 S. Madis | NG PERMIT A BUILDING INSPECTION son St, PO Box 529, E 490-3100 Iarr | N AND CODE ENFOR vansville, WI 53536 | |
| | | | IBING OTHER <u>fen</u> | cl |
| OWNER'S NAME | ADE | DRESS | PHONE | EMAIL |
| CONTRACTOR: CONST_HV | | LIC/CERT#/EXP | PHONE | EMAIL |
| CONTRACTOR:consttv | ing | # DC-06220073 | 608-279-008 | 1 arrajentusainto amail. co. |
| CONTRACTOR: | ACPLECPLBG | LIC/CERT#/EXP | PHONE | EMAIL |
| CONTRACTOR:CONSTHV | ACELECPLBG | LIC/CERT#/EXP | PHONE | EMAIL |
| CONTRACTOR: | ACELECPLBG | LIC/CERT#/EXP | PHONE | EMAIL |
| PROJECT AREA | 167 | | ROJECT COST \$ 35 , | 000 |
| I AGREE TO COMPLY WITH ALL APPLIC ISSUANCE OF THIS PERMIT CREATES N ACCURATE. IF I AM THE OWNER APPL | NO LEGAL LIABILITY, EXPRESS YING, I HAVE 2READ THE AT | OR IMPLIED, ON THE STATE OR M | UNICIPALITY: AND CERTIFY THAT | ALL THE INFORMATION IS |
| CONDITIONS OF APPROVA OR REVOCATION OF THIS PERMIT OR | L: THIS PERMIT IS ISSUED P OTHER PENALTY. | PURSUANT TO THE FOLLOWING CC | DNDITIONS, FAILURE TO COMPLY | MAY RESULT IN SUSPENSION |
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| PLOT PLAN MUST INCLUDE : I PROPOSED IMPROVEMENTS (PROPERTY LINES AND OTHER S EASEMENTS AND PROPERLY LA PLANS MUST INCLUDE : FLOO | DECK/FENCE/SHED/ET STRUCTURES. * <i>IT IS TH</i> ABEL THEM ON THE PLO OR PLAN, CROSS SECTION | C) SIZE & DIMENSIONS OF IE RESPONSIBILITY OF THE A OT PLAN - STRUCTURES ARE | IMPROVEMENTS - SETBAG APPLICANT TO VERIFY THE I PROHIBITED WITHIN EASE | CK DISTANCES TO EXISTENCE OF |
| IN COMPLIANCE WITH SPS 32 DECKS - SEE SPS 320-325 AF | | gov/UDC-ADMIN-CODE/ | | |
| PERMIT FEE: \$ | CHECK #: | DATE: | | |
| | | | | |
| PERMIT ISSUED BY: | CERTIFICA | ATION #: _70184 | | |

Style of Deck Suggested





Application No.: HPC-2023_

| Please attach the following required items using the space below or additional sheets as necessary, Each attachment should be marked with an exhibit number: Clear photo(s) of every portion of the property affected by the work Historic photograph (if available) Exterior elevations or sketches of existing conditions and proposed work |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Samples or specifications of proposed materials If Section 3B applies, evidence of un-reparability Site plan (if applicable) Print or PDF of State of WI historic property information, available by searching the property address at <u>www.wisconsinhistory.org</u> Additional attachments that may assist in understanding the proposed work |
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APPLICATION FOR CERTIFICATE OF APPROPRIATENESS CITY OF EVANSVILLE HISTORIC PRESERVATION COMMISSION 31 S. Madison St, PO Box 529, Evansville, WI 53536

[HPC/CDD] [A/D/C]

\$0.00 Application Fee

Application No.: HPC-2024- Magenda Item:

This is a request for issuance of a Certificate of Appropriateness (COA) by the Historic Preservation Commission (HPC) for work proposed to be performed on the exterior of a structure located in any Historic District or designated by the State or City as a historic building or historic site. Complete all sections of this form – it is used to determine if the proposal should be reviewed by staff or the HPC. **Submit questions or completed applications to address above, or via email to the Community Development Director, Colette Spranger, at: (608) 882-2263 or <u>c.spranger@evansvillewi.gov</u>.**

| SECTION | APPLICANT and/or OWNER INFORMATION | HISTORIC PROPERTY INFORMATION | |
|---------|------------------------------------------|--------------------------------------------------------------------|--|
| | Applicant Name: JoHN+KIM OTTO | Historic Property Address: | |
| | | 39 WEST LIBERTY | |
| | Applicant Mailing Address: | Evansville, WI 53536 | |
| | 39 WEST LIBERTY | The following information is available on the property's tax bill: | |
| | Applicant Phone: 608 751-8148 | Parcel Tax ID Number: 222 06/012 | |
| ก | Applicant Email: | Parcel Number: 6-27 1313 | |
| | If different from above, please provide: | The following information is available by | |
| | Owner Name: | searching the property address at | |
| | Owner Address: | www.wisconsinhistory.org/records): | |
| | | Historic Property Name: | |
| ĝ. | | A.S. BAKER HOUSE | |
| | Owner Phone: | AHI Number: 84945 | |
| | Owner Email: | Contributing: Y or N | |

INSTRUCTIONS: Complete this entire form and submit by mail or email the following:

- 1. Application Form with attachments (as outlined in Section 3C and 5):
 - Clear photo(s) of every portion of the property that will be affected by the work
 - Historic photograph(s) (if available)
 - Exterior elevations or sketches of existing conditions and proposed work
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 - o If Section 3B applies, evidence of un-reparability
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2. <u>Building Permit</u> (work cannot begin until Building Inspector has approved a Building Permit) All applications are to be submitted and deemed complete at least 10 days prior to the HPC meeting. HPC typically meets on the third Wednesday of each month at 6:00pm in City Hall. Applicants are encouraged to appear in person.

| Thank you for helping to value and pro | otect "one of the most integhnineteenth cen | tury townscapes in southern Wisconsin" |
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| and "the finest collection of 1897s - 19 | 15 granitacture of any small town in Wiscon | sin" – Wisconsin State Historic Society |
| SUBMITTED BY: | otect "one of the most internineteenth cen 15 or hill cture of any small town in Wiscon | DATE: 9-20-2024 |
| 1/10 | Owner or Applicant Signature | |

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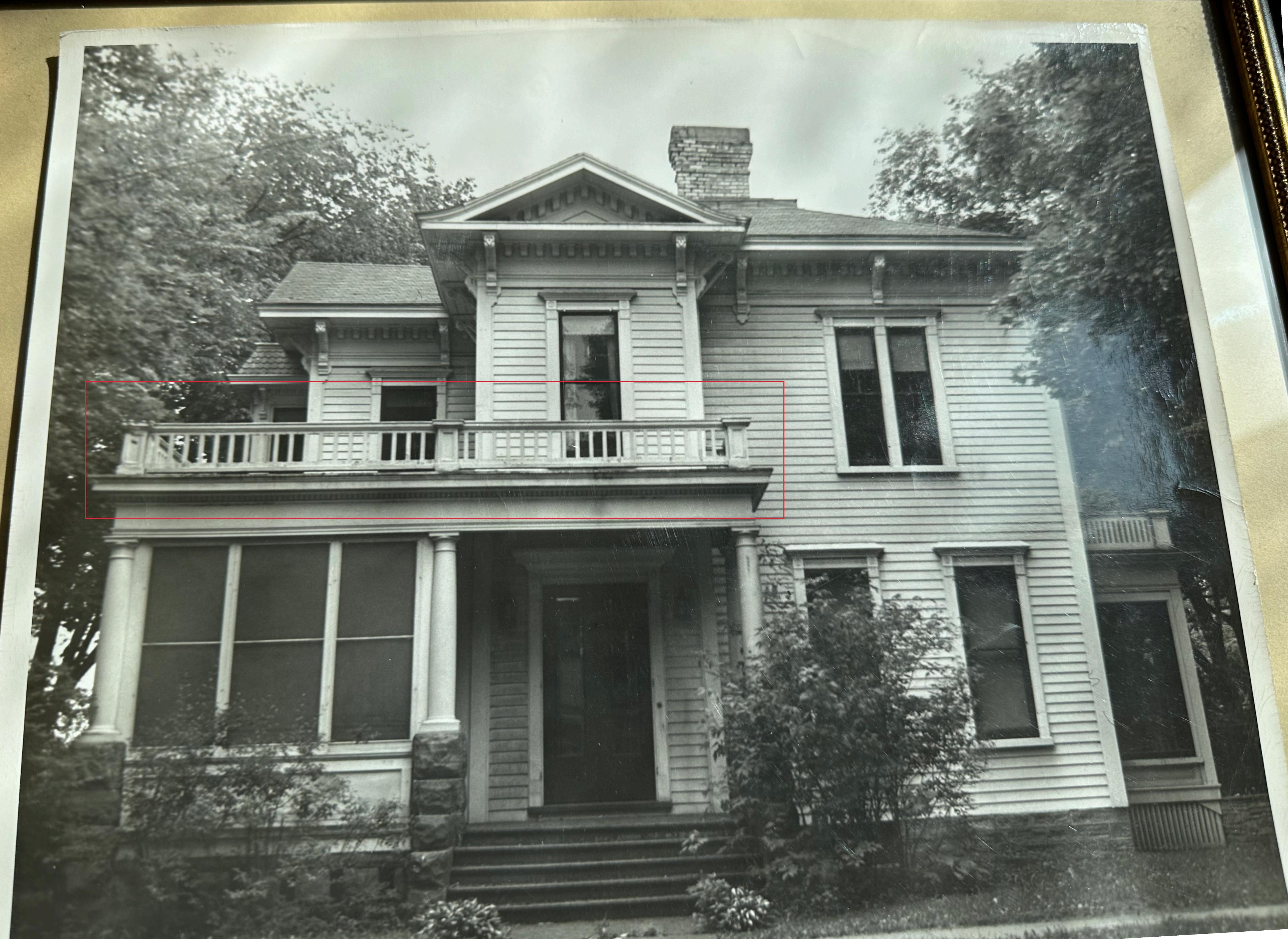


| SECTION | PROPOSED WORK CHECKLIST | | |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 2 | Please check all boxes that apply and provide more detail in Sections 3 and 4: | | |
| Work | Category | Work Category Details | |
| 🗆 Roofing | Replacement Minor repair | □Shingles only □Soffit, fascia, or trim work □Matching existing materials □Change of materials (EG, replacing asphalt with metal) | |
| Gutters | New or repair Replacement Removal | Change of materials Match existing historic materials (metal, etc.) Use new modern materials (vinyl, etc.) | |
| 🗆 Siding | ☐ Minor repair ☐ Replacement | □Change of materials □Match historic materials (wood, cement board, etc.) □Use modern materials (plastic, vinyl aluminum, etc.) | |
| Exterior windows and doors | □ Add new □ Replacement □ Removal | Change in dimension or location (height, length) Match historic materials (wood, metal, glass, etc.) Use modern material (plastic, vinyl, aluminum, etc.) Removal, covering or alteration of original trim | |
| 🗆 Fences | □ New □ Repair □ Replacement | □Use new modern materials (vinyl, aluminum, etc.) □Matching historic materials (wood, stone, etc.) | |
| Porch | Minor repair Replacement Removal Add new | ☑Match historic material (wood, metal, etc.) ☑ ☑Use new modern material (plastic, vinyl, aluminum, etc.) ☑ ☑Column, railing, or skirting ☑ □Decking | |
| □ Sidewalk or paving | New Repair Replacement | Recreating Matching existing materials Other: | |
| □ New construc- tion | Addition New building Façade alteration | Recreating missing architectural features Removing architectural features Other: | |
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| □Other | New Repair Replacement Removal | New modern materials Match existing materials Removal or altering of original architectural details | |

| SECTION | PROPOSED WORK SUMMARY |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ß | 3A For each Item that was checked in the left-hand column of Section 2, provide a more detailed description of the work proposed to be done: |
| | PUTTING BACK DRIGINAL FORCH RAILINGS THAT ARE AS CLOSE AS POSSIBLE TO ORIGINAL SUBMITTED Photos |
| | Pursuant to State Statute 62.23(7) (em) (2m) replacement materials shall be similar in design color, scale, architectural appearance, and other visual qualities. Please help the HPC or city staff better understand your project proposal by providing the following information: |
| | 3B Will your project include replacing materials original to your historic building, including: siding, windows, trim, doors, etc? |
| | 3C If so, summarize any attempts to repair the original materials and attach a con- tractor estimate that demonstrates the un-reparability of original materials: Wood RAILINGS LIKE THE ORIGINALS |
| | |
| | |

| SECTION | SUPPLEMENTAL QUESTIONS |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | 4A Will the proposed work alter any of the distinctive features or historic architectural details of the property? |
| | NO |
| 4 | 4B Please briefly describe how the proposed work will conform to the Standards and Guidelines of the Secretary of the U.S. Dept. of the Interior for the Rehabilitation of His- toric Properties (available at <u>www.nps.gov/tps/standards/rehabilitation.htm</u> and at City Hall.) Adherence to these standards and guidelines will help assure your property's eligibility for po- tential State and Federal tax credits. THE PropOSEd Work Will BE Dowe AS CLOSE TO THE DICIONAL AS POSSIBLE. |
| | 4C Have you submitted this project for state or federal tax credits? |

| BUILDING CITY OF EVANSVILLE BUIL 31 S. Madison (608) 490-3100 PERMIT REQUESTED: | St, PO Box 529, Evan permits@e STORAGE SHED (<150 | LICATION ND CODE ENFORCEMENT sville, WI 53536 vansvillewi.gov SQ FT) 	PATIO | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------------------------------------------|--|--|--|--|
| HISTORIC DISTRICT? MYES D NO | IF YES, COA RECEIVED | ? 🗆 | | | | |
| PROJECT ADDRESS | PARCEL #: | TAX ID # | | | | |
| 39 WEST LIBERTY | 6-27-1312 | 222 061012 | | | | |
| OWNER'S NAME | OWNER'S ADDRESS (IF DIF | | | | | |
| JOHNY KIMBERLYN OTTO | ס ^י | | | | | |
| PHONE 608-751-8148 | EMAIL | 39 9 yattoo. Com | | | | |
| CONTRACTOR | LIC/CERT# | · · · · · · · · · · · · · · · · · · · | | | | |
| GORDON MILLER | | | | | | |
| | EMAIL | | | | | |
| 608 669-3469 | gordy @ qu | ordomm; Ilen Woodworks | | | | |
| PROJECT AREA (SQ.FT.) | ESTIMATED PROJ | IECT COST \$) | | | | |
| SETBACKS | | | | | | |
| FRONT YARDFT REAR YARDFT | SIDE YARD | _FT STREET SIDE YARDFT | | | | |
| FENCE PROJECT (choose those that apply) MATERIAL V WOOD CHAIN LINK PLASTIC/VI | | | | | | |
| | | YES NO N/A RONT/STREET SIDE YARD | | | | |
| TYPE OPEN DICKET LATTICE OTHER ORIGINAL PONVER | | | | | | |
| DRIVEWAY | - and wig | | | | | |
| | ORK IN THE RIGHT OF WAY" P | PERMIT IS NEEDED. INQUIRE WITH THE CITY CLERK) | | | | |
| PAVEMENT DISTANCE FROM PROPERTY LINE | | (MUST BE AT LEAST 3 FEET) | | | | |
| STORAGE SHED OR PATIO DIMENSIONS | | | | | | |
| LENGTH | WIDTH | | | | | |
| I AGREE TO COMPLY WITH ALL APPLICABLE CODES, STATUTES AN THAT THE ISSUANCE OF THIS PERMIT CREATES NO LEGAL LIABILI ALL THE INFORMATION IS ACCURATE. IF I AM THE OWNER APPLY CONTRACTOR FINANCIAL RESPONSIBILITY. APPLICANT'S SIGNATURE CONDITIONS OF APPROVAL: THIS PERMIT IS ISSUED PURSUA OR REVOCATION OF THIS PERMIT OR OTHER PENALTY. | TY, EXPRESS OR IMPLIED, ON VING, I HAVE READ THE ATTAC | THE STATE OR MUNICIPALITY; AND CERTIFY THAT CHED CAUTIONARY STATEMENT REGARDING DATE 9-20-24 | | | | |
| | | | | | | |
| PERMIT FEE: \$50.00 CHECK #: | DATE: | - | | | | |
| PERMIT ISSUED BY: | - | | | | | |
| | | | | | | |















APPLICATION FOR CERTIFICATE OF APPROPRIATENESS CITY OF EVANSVILLE HISTORIC PRESERVATION COMMISSION

31 S. Madison St, PO Box 529, Evansville, WI 53536

\$0.00 **Application** Fee

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|---------|------------------------------------------|------------------------------------------------------------------------------------------------------------------------|--|--|
| | Applicant Name: | Historic Property Address: | | |
| | Applicant Mailing Address: | Evansville, WI 53536 The following information is available on the property's tax bill: | | |
| | Applicant Phone: | Parcel Tax ID Number: 222 | | |
| 5 | Applicant Email: | Parcel Number: 6-27 | | |
| | If different from above, please provide: | The following information is available by searching the property address at <u>www.wisconsinhistory.org/records</u>): | | |
| | Owner Name: | | | |
| | Owner Address: | | | |
| | | Historic Property Name: | | |
| | | | | |
| | Owner Phone: | AHI Number: | | |
| | Owner Email: | Contributing: Y or N | | |

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Thank you for helping to value and protect "one of the most intact nineteenth century townscapes in southern Wisconsin" and "the finest collection of 1840s - 1915 architecture of any small town in Wisconsin" - Wisconsin State Historic Society

SUBMITTED BY:

Owner or Applicant Signature

DATE:

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| SECTION | PROPOSED WORK CHECKLIST | | | | | | |
|------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| 2 | Please check all boxes that apply and provide more detail in Sections 3 and 4: | | | | | | |
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| □ Sidewalk or paving | □ New □ Repair □ Replacement | □Recreating □Matching existing materials □Other: | | | | | |
| □ New construc- tion | Addition New building Façade alter- ation | Recreating missing architectural features Removing architectural features Other: | | | | | |
| ☐ Signage and exterior lighting | □ New□ Repair□ Replacement | Signage (Complete Sign Permit Application instead). Lighting New alternative materials Matching existing materials | | | | | |
| □Other | □ New □ Repair □ Replacement □ Removal | New modern materials Match existing materials Removal or altering of original architectural details | | | | | |

| SECTION | PROPOSED WORK SUMMARY |
|---------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | 3A For each Item that was checked in the left-hand column of Section 2, provide a more detailed description of the work proposed to be done: |
| | |
| 5 | Pursuant to State Statute 62.23(7)(em)(2m) replacement materials shall be similar in design color, scale, architectural appearance, and other visual qualities. Please help the HPC or city staff better understand your project proposal by providing the following information: |
| 2 | 3B Will your project include replacing materials original to your historic building, including: siding, windows, trim, doors, etc? |
| | 3C If so, summarize any attempts to repair the original materials and attach a con- tractor estimate that demonstrates the un-reparability of original materials: |
| | |

| SECTION | SUPPLEMENTAL QUESTIONS |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECTION | 4A Will the proposed work alter any of the distinctive features or historic architectural details of the property? 4B Please briefly describe how the proposed work will conform to the Standards and |
| Ą | Guidelines of the Secretary of the U.S. Dept. of the Interior for the Rehabilitation of His- toric Properties (available at <u>www.nps.gov/tps/standards/rehabilitation.htm</u> and at City Hall.) Adherence to these standards and guidelines will help assure your property's eligibility for po- tential State and Federal tax credits. |
| | 40 have you submitted this project for state of rederal tax credits? |

RESIDENTIAL MINOR IMPROVEMENT BUILDING PERMIT APPLICATION

CITY OF EVANSVILLE BUILDING INSPECTION AND CODE ENFORCEMENT

31 S. Madison St, PO Box 529, Evansville, WI 53536

(608) 490-3100 permits@evansvillewi.gov

 PERMIT REQUESTED:
 □ FENCE □ SIDING □ ROOF □ STORAGE SHED (<150 SQ FT) □ PATIO</td>

 □ DRIVEWAY □ DOOR/WINDOW REPLACEMENT □ OTHER ______

HISTORIC DISTRICT?
YES NO IF YES, COA RECEIVED?

| PROJECT ADDRESS | | | | PARCEL | | | TAX ID # | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------|-------------|-------------------------------------------------|---------------|-------------|----------------|---------|-----------|-----------|
| | | | | 6-27 | - | 222 | 222 | | | |
| OWNER'S NAME | | | | OWNER'S ADDRESS (IF DIFFERENT) | | | | | | |
| PHONE | | | | EMAIL | | | | | | |
| CONTRACTO | R | | | LIC/CER | Γ# | | | | | |
| PHONE | | | | EMAIL | | | | | | |
| PROJECT ARE | A (SQ.FT.) | | | ES | TIMATED PRO | DJECT CO | OST \$) | | | |
| SETBACKS | | | | T | | | T | | | |
| FRONT YARD | FT | REAR YARD | FT | SIDE Y | ARD | FT | STREET SIDE Y | ARD | FT | |
| FENCE PROJECT | (choose those th | at apply) | | | | | | | | |
| MATERIAL | □ WOOD □ □ OTHER | CHAIN LINK D | LASTIC/VINY | 3 FEET MAX ON FRONT/STREET SIDE YARD | | | | | N/A | |
| ТҮРЕ | OPEN OTHER | PICKET 🗆 LATTIO | CE 🗆 SC | SOLID 50% OPACITY ON FRONT/STREET SIDE YARD | | | | | | |
| DRIVEWAY | | | | | | | | | | |
| CURB CUTS REQ | UIRED? | □NO □YES (IF ` | YES, A "WOF | RK IN THE | RIGHT OF WAY" | ' PERMIT IS | S NEEDED. INQU | IRE WIT | H THE CIT | Y CLERK) |
| PAVEMENT DIST PROPERTY LINE | | | | | | | 1) | MUST BE | E AT LEAS | T 3 FEET) |
| STORAGE SHED | OR PATIO DIMEN | ISIONS | | | | | | | | |
| LENGTH WIDTH | | | | | | | | | | |
| I AGREE TO COMPLY WITH ALL APPLICABLE CODES, STATUTES AND ORDINANCES AND WITH THE CONDITIONS OF THIS PERMIT; UNDERSTAND THAT THE ISSUANCE OF THIS PERMIT CREATES NO LEGAL LIABILITY, EXPRESS OR IMPLIED, ON THE STATE OR MUNICIPALITY; AND CERTIFY THAT ALL THE INFORMATION IS ACCURATE. IF I AM THE OWNER APPLYING, I HAVE READ THE ATTACHED CAUTIONARY STATEMENT REGARDING CONTRACTOR FINANCIAL RESPONSIBILITY. | | | | | | | | | | |
| APPLICANT'S SIGNATUREDATEDATE | | | | | | | | | | |
| CONDITIONS OF APPROVAL: THIS PERMIT IS ISSUED PURSUANT TO THE FOLLOWING CONDITIONS, FAILURE TO COMPLY MAY RESULT IN SUSPENSION OR REVOCATION OF THIS PERMIT OR OTHER PENALTY. | | | | | | | | | | |
| | | СНЕСК #: | | ATE: | | | | | | |
| FLRWIT 1330 | | | | | | | | | | |

Eager Free Public Library

Maintenance & Repair – West Door



The following is information is to assist in the determination of Historical appropriateness. The existing is a non-historic douglas fur door, estimated installed in the 1990's- Melissa Destree



1



Existing West Door

New Door

Door Replacement Options (Simpson Doors estimate by Nelson-Young)

Slab - 2 1/4" Red Oak - Rift Cut

Recommendation - Pre-Hung - 2 ¹/₄" Red Oak – Rift Cut

Slab - 2 1/4" Red Oak - Rotary

Pre-Hung - 2¹/₄" Red Oak – Rotary



Wood density – old growth vs. new growth





Rotary Cut-more dynamic grain, less visual density

(ORB Hinges/Bronze Sill)

(ORB Hinges/Bronze Sill)

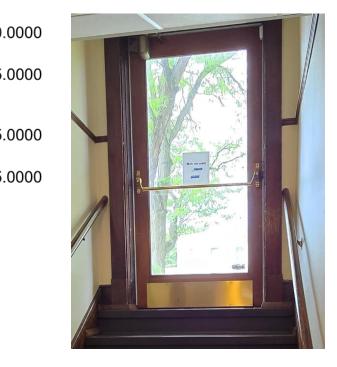


Rift Sawn – perceived density is more similar to old growth 1880's wood cut.

Estimate

Hardware (by LaForce)

| 1.000 | 1 | HDW | VON DUPRIN 379L x 07 x RHR x 613 (US10B), LEVER TRIM ONLY, OIL-RUBBED DARK BRONZE, LESS KEY CYLINDER | 850.0 |
|-------|---|-----|------------------------------------------------------------------------------------------------------------------------------|-------|
| 2.000 | 1 | HDW | SCHLAGE 20-001 x 1 1/4" x B502-191 CAM x US10B x C- KWY, MORTISE CYLINDER, KEYED RANDOM (FINAL KEYING TO BE BY OTHERS) | 75.0 |
| 3.000 | 1 | HDW | K1062 10" X 4" HVBEV US10BE062" THICK PLATE, "HEAVY BEVEL" EDGES, 4"W x 10"H KICK PLATE | 55.0 |
| 4.000 | 1 | HDW | LCN 4040XP EDA TBWMS 4040XP-18PA 695 CLOSER | 575.0 |



Reuse Von Duprin 55 Exit Bar Device



US10B – oil rubbed bronze ORB



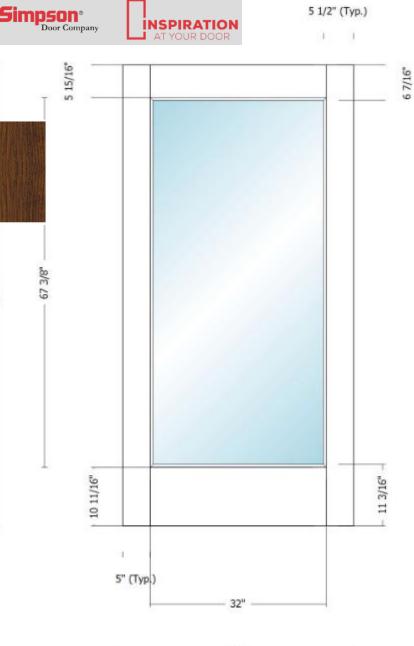
New Exterior lever handle w/ lock cylinder in ORB New LCN door closer in ORB

Need to specify weather stripping/sweep



Next Steps

- Awaiting clear Gray/Low-E Glass Sample for approval from Simpson (1 week)
- Staining by Gordy Miller w/ PPG Sikkens ProLuxe Cetol 1 RE & 23 Dark Oak, color sample to be approved by Architect, similar to interior original doors.
- Install with hardware mounting, weather stripping, brick mould - by Keith Liska
- Key new cylinder lock to be keyed to master (by Library)
- Reinstall security sensor (by Library)
- Submit to Historic Commission (Destree)



Door Slab or Pre-Hung

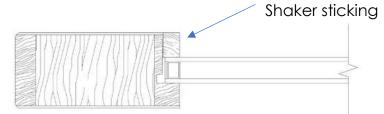
QUOTE #: 5517529-100-1 QUOTE VALID THROUGH: 10/3/2024

7002 Thermal French

SERIES: Exterior French & Sash Doors DOOR DESIGN: 7002 QUANTITY: 1

DOOR SPECIFICATIONS

SPECIES: Oak (Rift Cut Red) WOOD GRADE: Select WIDTH: 3-6" HEIGHT: 7-0" THICKNESS: 2 1/4" PROFILE: Shaker Sticking GLASS: Gray / Low-E with Argon ADDITIONAL OPTIONS: UltraBlock® Technology Cartoned



ESTREE hitecture & design

9/27/2024

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