

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, July 17th, 2024
3rd Floor, City Hall, 31 S. Madison Street, Evansville, WI 53536
6:00 p.m.

AGENDA

1. Call to Order
2. Roll Call
3. Motion to approve the agenda.
4. Motion to waive the reading of the June 19th, 2024 minutes and approve them as printed.
5. Civility reminder
6. Citizen appearances
7. Action Items
 - A. 223 S Third – New Wood/Metal Fence (HPC-2024-21)
 - B. 103 S Third – Repair/replace gutters with same, repair wood porch with same, add shutters (HPC-2024-22)
 - C. 33 N First – Repair Wood Windows with Wood (HPC-2024-23)
8. Discussion Items
 - A. 321 W Liberty – Outbuilding Repair/Restoration
9. Report of the Community Development Director
 - A. Staff Issued Certificates of Appropriateness
 - i. 38 W Church – Replace asphalt shingle roof with same (HPC-2024-24)
 - ii. 236 W Main – Replace Gutters (HPC-2024-25)
 - B. Local History and Historic Preservation Conference – October 16 through 18, Appleton
 - C. CLG Grant Application – Carriage House Survey?
10. Correspondence, Comments and Concerns
11. Next Meeting Date: August 21st, 2024, 6:00 p.m.
12. Motion to Adjourn.

-Dan Stephans, Historic Preservation Chair



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

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 c.spranger@evansvillewi.gov.**

SECTION	APPLICANT and/or OWNER INFORMATION	HISTORIC PROPERTY INFORMATION
1	Applicant Name: <u>Katie & Sam Worple</u>	Historic Property Address: <u>223 S 3rd St</u>
	Applicant Mailing Address: <u>223 S 3rd St.</u> <u>Evansville, WI 53536</u>	Evansville, WI 53536
	Applicant Phone: <u>715-450-1514</u>	The following information is available on the property's tax bill:
	Applicant Email: <u>worpless@</u>	Parcel Tax ID Number: 222 <u>00123703</u>
	If different from above, please provide:	Parcel Number: 6-27- <u>230.3</u>
	Owner Name:	The following information is available by searching the property address at www.wisconsinhistory.org/records :
	Owner Address:	Historic Property Name: <u>N/A</u>
	Owner Phone:	AHI Number:
	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
- ☒ Samples or specifications of proposed materials
- ☒ If Section 3B applies, evidence of un-reparability
- ☒ Site plan (if applicable)

N/A 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 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: Katie Worple

Owner or Applicant Signature

DATE: 07/01/2024

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
<input type="checkbox"/> Roofing	<input type="checkbox"/> Replacement <input type="checkbox"/> Minor repair	<input type="checkbox"/> Shingles only <input type="checkbox"/> Soffit, fascia, or trim work <input type="checkbox"/> Matching existing materials <input type="checkbox"/> Change of materials (EG, replacing asphalt with metal)
<input type="checkbox"/> Gutters	<input type="checkbox"/> New or repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> Change of materials <input type="checkbox"/> Match existing historic materials (metal, etc.) <input type="checkbox"/> Use new modern materials (vinyl, etc.)
<input type="checkbox"/> Siding	<input type="checkbox"/> Minor repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Change of materials <input type="checkbox"/> Match historic materials (wood, cement board, etc.) <input type="checkbox"/> Use modern materials (plastic, vinyl aluminum, etc.)
<input type="checkbox"/> Exterior windows and doors	<input type="checkbox"/> Add new <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> Change in dimension or location (height, length) <input type="checkbox"/> Match historic materials (wood, metal, glass, etc.) <input type="checkbox"/> Use modern material (plastic, vinyl, aluminum, etc.) <input type="checkbox"/> Removal, covering or alteration of original trim
<input checked="" type="checkbox"/> Fences	<input checked="" type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input checked="" type="checkbox"/> Use new modern materials (vinyl, aluminum, etc.) <input type="checkbox"/> Matching historic materials (wood, stone, etc.)
<input type="checkbox"/> Porch	<input type="checkbox"/> Minor repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal <input type="checkbox"/> Add new	<input type="checkbox"/> Match historic material (wood, metal, etc.) <input type="checkbox"/> Use new modern material (plastic, vinyl, aluminum, etc.) <input type="checkbox"/> Column, railing, or skirting <input type="checkbox"/> Decking
<input type="checkbox"/> Sidewalk or paving	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Recreating <input type="checkbox"/> Matching existing materials <input type="checkbox"/> Other: _____
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition <input type="checkbox"/> New building <input type="checkbox"/> Façade alteration	<input type="checkbox"/> Recreating missing architectural features <input type="checkbox"/> Removing architectural features <input type="checkbox"/> Other: _____
<input type="checkbox"/> Signage and exterior lighting	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> <u>Signage (Complete Sign Permit Application instead).</u> <input type="checkbox"/> Lighting <input type="checkbox"/> New alternative materials <input type="checkbox"/> Matching existing materials
<input type="checkbox"/> Other	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> New modern materials <input type="checkbox"/> Match existing materials <input type="checkbox"/> Removal or altering of original architectural details <input type="checkbox"/> _____

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: We would like to construct a fence around the perimeter of our backyard (see photo #2), along with a gate.
	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? NO
	3C If so, summarize any attempts to repair the original materials and attach a contractor estimate that demonstrates the un-reparability of original materials: —

SECTION	SUPPLEMENTAL QUESTIONS
4	4A Will the proposed work alter any of the distinctive features or historic architectural details of the property? NO
	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. Our home is not from the 1980s, so the fence style we chose will be complementary to our home's style. It will also be manageable to maintain the aesthetic
4C Have you submitted this project for state or federal tax credits? NO	

SECTION	REQUIRED ATTACHMENTS
5	<p>Please attach the following required items using the space below or additional sheets as necessary, Each attachment should be marked with an exhibit number:</p> <ol style="list-style-type: none">1. Clear photo(s) of every portion of the property affected by the work <i>photo #1</i>2. Historic photograph (if available) <i>N/A</i>3. Exterior elevations or sketches of existing conditions and proposed work <i>photo #1</i>4. Samples or specifications of proposed materials <i>photo #2</i>5. If Section 3B applies, evidence of un-reparability <i>N/A</i>6. Site plan (if applicable) <i>N/A</i>7. Print or PDF of State of WI historic property information, available by searching the property address at www.wisconsinhistory.org <i>N/A</i>8. Additional attachments that may assist in understanding the proposed work <i>photos #1 + 2</i>
<div data-bbox="667 1854 922 1890">EXHIBIT: _____</div>	

Photo #1



blue line demonstrates where on the lot the fence will go.

It will run next to the fence from our neighbors at 315 Liberty, as well as along the fence line of our neighbor at 311.

Photo #2



example of fencing materials used

- lumber
- hog wire



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
☐ DRIVEWAY ☐ DOOR/WINDOW REPLACEMENT ☐ OTHER _____

HISTORIC DISTRICT? ☒ YES ☐ NO

IF YES, COA RECEIVED? ☒

PROJECT ADDRESS

223 S 3rd St. Evansville

PARCEL #:

6-27-230.3

TAX ID

222 00123703

OWNER'S NAME

Katie and Sam Worple

OWNER'S ADDRESS (IF DIFFERENT)

PHONE

715-450-1514

EMAIL

worpless@gmail.com

CONTRACTOR

N/A

LIC/CERT#

—

PHONE

—

EMAIL

—

PROJECT AREA (SQ. FT.) 271 linear ft. ESTIMATED PROJECT COST \$ 12500

SETBACKS

FRONT YARD 57 FT REAR YARD 0 FT SIDE YARD 0 FT STREET SIDE YARD N/A FT

FENCE PROJECT (choose those that apply)

MATERIAL ☒ WOOD ☐ CHAIN LINK ☐ PLASTIC/VINYL

☒ OTHER hogwire

HEIGHT

3 FEET MAX ON FRONT/STREET SIDE YARD

50% OPACITY ON FRONT/STREET SIDE YARD

6 FEET MAX ON SIDE/REAR YARD

YES

NO

N/A

☐

☐

☒

☒

☐

☒

☒

☐

☐

TYPE ☐ OPEN ☐ PICKET ☐ LATTICE ☐ SOLID

☒ OTHER hogwire

DRIVEWAY

CURB CUTS REQUIRED?

☐ NO

☐ YES (IF YES, A "WORK IN THE RIGHT OF WAY" 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 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 SIGNATURE [Signature]

DATE 07/01/2024

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.

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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SECTION	APPLICANT and/or OWNER INFORMATION	HISTORIC PROPERTY INFORMATION
1	Applicant Name: <u>Kari + Brenda Hager</u>	Historic Property Address:
		<u>103 S 3rd St.</u>
	Applicant Mailing Address:	Evansville, WI 53536
	<u>103 S 3rd St.</u>	The following information is available on the property's tax bill:
	<u>Evansville, WI 53536</u>	Parcel Tax ID Number: 222 <u>001212</u>
	Applicant Phone: <u>608-778-3593</u>	Parcel Number: 6-27- <u>210</u>
	Applicant Email: <u>hagerkari@gmail.com</u>	The following information is available by searching the property address at www.wisconsinhistory.org/records:
	If different from above, please provide:	
	Owner Name:	
	Owner Address:	
		Historic Property Name:
		<u>None Listed</u>
Owner Phone:	AHI Number: <u>84830</u>	
Owner Email:	Contributing: <input checked="" type="radio"/> 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):

- o Clear photo(s) of every portion of the property that will be affected by the work
- o Historic photograph(s) (if available)
- o Exterior elevations or sketches of existing conditions and proposed work
- o Samples or specifications of proposed materials
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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: Kari Hager DATE: 6/22/24
Owner or Applicant Signature

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
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<input checked="" type="checkbox"/> Gutters	<input checked="" type="checkbox"/> New or repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> Change of materials <input checked="" type="checkbox"/> Match existing historic materials (metal, etc.) <input type="checkbox"/> Use new modern materials (vinyl, etc.)
<input checked="" type="checkbox"/> Siding	<input checked="" type="checkbox"/> Minor repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Change of materials <input checked="" type="checkbox"/> Match historic materials (wood, cement board, etc.) <input type="checkbox"/> Use modern materials (plastic, vinyl aluminum, etc.)
<input type="checkbox"/> Exterior windows and doors	<input type="checkbox"/> Add new <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> Change in dimension or location (height, length) <input type="checkbox"/> Match historic materials (wood, metal, glass, etc.) <input type="checkbox"/> Use modern material (plastic, vinyl, aluminum, etc.) <input type="checkbox"/> Removal, covering or alteration of original trim
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<input checked="" type="checkbox"/> Porch	<input type="checkbox"/> Minor repair <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Removal <input type="checkbox"/> Add new	<input checked="" type="checkbox"/> Match historic material (wood, metal, etc.) <input checked="" type="checkbox"/> Use new modern material (plastic, vinyl, aluminum, etc.) <input checked="" type="checkbox"/> Column, railing, or skirting <input checked="" type="checkbox"/> Decking
<input type="checkbox"/> Sidewalk or paving	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Recreating <input type="checkbox"/> Matching existing materials <input type="checkbox"/> Other: _____
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition <input type="checkbox"/> New building <input type="checkbox"/> Façade alteration	<input type="checkbox"/> Recreating missing architectural features <input type="checkbox"/> Removing architectural features <input type="checkbox"/> Other: _____
<input type="checkbox"/> Signage and exterior lighting	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> <u>Signage (Complete Sign Permit Application instead).</u> <input type="checkbox"/> Lighting <input type="checkbox"/> New alternative materials <input type="checkbox"/> Matching existing materials
<input checked="" type="checkbox"/> Other	<input type="checkbox"/> New <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> New modern materials <input type="checkbox"/> Match existing materials <input type="checkbox"/> Removal or altering of original architectural details <input checked="" type="checkbox"/> <u>Repaint House Exterior Color</u>

SECTION	PROPOSED WORK SUMMARY
3	<p>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:</p> <ul style="list-style-type: none"> • Repair del gutters with new + add gutters where they are currently missing. • Repair rotten siding + rotten wood on front + side porches, including columns if necessary. • Repaint exterior with darker color + 2-tones like the original picture, possibly add shutters to match original as well. <p>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:</p>
	<p>3B Will your project include replacing materials original to your historic building, including: siding, windows, trim, doors, etc? <u>Yes - replacing with wood which matches original material.</u></p>
	<p>3C If so, summarize any attempts to repair the original materials and attach a contractor estimate that demonstrates the un-reparability of original materials:</p> <p><u>Estimates = \$5000 - \$10,000 for work. Most will be done by us and not a contractor.</u></p>

SECTION	SUPPLEMENTAL QUESTIONS
4	<p>4A Will the proposed work alter any of the distinctive features or historic architectural details of the property?</p> <p><u>No</u></p>
	<p>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.)</p> <p>Adherence to these standards and guidelines will help assure your property's eligibility for potential State and Federal tax credits.</p> <p><u>- Keeping all original materials and features. Repairing to keep the historic property alive and well. Most repairs are due to water damage over the years.</u></p>
	<p>4C Have you submitted this project for state or federal tax credits?</p> <p><u>Not yet. Waiting for appraisal to apply.</u></p>

FOR INSPECTIONS CALL: 		GENERAL BUILDING PERMIT APPLICATION GENERAL ENGINEERING COMPANY OFFICE: (608) 745-4070 FAX: (608) 745-5763				PERMIT # EXPIRATION DATE: 		
Parcel Number: <u>6-27-210</u>		Property is Located in <input type="radio"/> Town of <input type="radio"/> Village of <input checked="" type="radio"/> City of				Municipality Number _____		
PROJECT DESCRIPTION (Submit Building Plans & Site Plan) <u>Replacement / Repairing House Exterior - Gutters, Siding, Porches, + Paint</u>		Does this project require any additional approvals or permits? <input type="radio"/> yes <input checked="" type="radio"/> no						
Building Project Address: <u>103 S 3rd St. Evansville, WI 53536</u>						Finished Project Value \$ _____		
Zoning District(s):	Zoning Permit No.:	Corner Lot <input checked="" type="radio"/> yes <input type="radio"/> no	Bldg. Height Ft.	Setbacks:	Front	Rear	Left	Right
Owner's Name(s) <u>Kari + Brenda Hazer</u>		Mailing Address <u>103 S. 3rd St. Evansville, WI</u>				Telephone <u>608-778-3593</u>		
Contractor Name & Type		Licen. / Cert #	Exp. Date	Mailing Address		Email		Telephone & Email
Construction Contractor						Tel.		
Dwelling Contractor Qualifier				The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.		Tel.		
HVAC Contractor						Tel. x		
Electrical Contractor						Tel.		
Master Electrician						Tel.		
Plumbing Contractor						Tel.		
RESIDENTIAL Single Family/Duplex		Addition: <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction _____ sq. ft. <input type="checkbox"/> Erosion Control						
		Detached Accessory Building: <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction _____ sq. ft.						
		Remodel: <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction _____ sq. ft.						
		Other: <input type="checkbox"/> Fence <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction _____ sq. ft. <input type="checkbox"/> Erosion Control <input type="checkbox"/> Electrical Service Upgrade (Amp _____) <input type="checkbox"/> Removal of Structure (Raze) <input type="checkbox"/> _____						
COMMERCIAL		New Commercial Building: _____ Bldg. Sq. Ft. <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction <input type="checkbox"/> Erosion Control						
		Commercial Addition/Alteration: <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> HVAC <input type="checkbox"/> Construction <input type="checkbox"/> Erosion Control _____ Building Sq. Ft. <input type="checkbox"/> Electrical Service (Amp _____) <input type="checkbox"/> Fence <input type="checkbox"/> Sign <input type="checkbox"/> Removal of Structure (Raze)						
		State of Wisconsin Plan Approval Needed: <input type="radio"/> yes <input type="radio"/> no (Approved plans must be submitted with permit application)						
Zoning - When applicable, owner shall research setback information regarding height, lot coverage, etc. prior to submittal of this application.								
<small>I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side of the last ply of this application. I expressly grant the building inspector or the inspector's authorized agent permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. It is the Owner/Contractors Responsibility to Call in ALL INSPECTIONS to the Inspector.</small>								
APPLICANT'S SIGNATURE <u>Kari Hazer</u>						DATE SIGNED <u>7/22/24</u>		
APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.								
BELOW SECTION FOR OFFICE USE ONLY								
FEES: Construction \$ _____ Plumbing \$ _____ Electrical \$ _____ HVAC \$ _____ Zoning \$ _____ Other \$ _____ Administrative \$ _____ Total Permit Fee \$ _____		PERMIT(S) ISSUED <input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other _____			PERMIT ISSUED BY: Name _____ Date _____ Telephone _____ Cert No. _____ Census Code _____ www.generalengineering.net			

PROPERTY RECORD

103 S 3RD ST

Architecture and History Inventory



NAMES

Historic Name:

Other Name:

Contributing: **Yes**

Reference Number: **84830**

PROPERTY LOCATION

Location (Address): **103 S 3RD ST**

County: **Rock**

City: **Evansville**

Township/Village:

Unincorporated Community:

Town:

Range:

Direction:

Section:

Quarter Section:

Quarter/Quarter Section:

PROPERTY FEATURES

Year Built: **1860**

Additions:

Survey Date: **2006**

Historic Use: **house**

Architectural Style: **Gabled Ell**

Structural System:

Wall Material: **Clapboard**

Architect:

Other Buildings On Site:

Demolished?: **No**

Demolished Date:

NATIONAL AND STATE REGISTER OF HISTORIC PLACES

National/State Register Listing Name: **Evansville Historic District**

National Register Listing Date: **11/16/1978**

State Register Listing Date: **1/1/1989**

National Register Multiple Property Name:

NOTES

Additional Information: BUILT PRIOR TO 1871 ACCORDING TO 1871 BIRD'S EYE VIEW. Sunroom was added ca. 1890.

Bibliographic References: Historical and Architectural Walking Tour of Evansville's Historic District, Evansville Historic Preservation Commission, 1992. BIRD'S EYE VIEW OF EVANSVILLE, WI. CHICAGO: CHICAGO LITHOGRAPHING CO., 1871.

RECORD LOCATION

Wisconsin Architecture and History Inventory, State Historic Preservation Office. Wisconsin Historical Society. Madison. Wisconsin



APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

CITY OF EVANSVILLE HISTORIC PRESERVATION COMMISSION
31 S. Madison St, PO Box 529, Evansville, WI 53536

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SECTION	APPLICANT and/or OWNER INFORMATION	HISTORIC PROPERTY INFORMATION
1	Applicant Name: Zack Jones	Historic Property Address:
	Marissa Cimerelli	33 N. 1st St.
	Applicant Mailing Address:	Evansville, WI 53536
	33 N. 1st St.	The following information is available on the property's tax bill:
	Evansville, WI 53536	Parcel Tax ID Number: 222 012007
	Applicant Phone: (484) 664-0566	Parcel Number: 6-27-4-10
	Applicant Email: marissa.cimerelli@gmail	The following information is available by searching the property address at www.wisconsinhistory.org/records:
	If different from above, please provide:	Historic Property Name:
	Owner Name:	Robert and Margaret Antes House
	Owner Address:	AHI Number: 84820
		Contributing <input checked="" type="radio"/> 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
- 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 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 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:

Marissa Cimerelli
Owner or Applicant Signature

DATE: 7-12-24

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
<input type="checkbox"/> Roofing	<input type="checkbox"/> Replacement <input type="checkbox"/> Minor repair	<input type="checkbox"/> Shingles only <input type="checkbox"/> Soffit, fascia, or trim work <input type="checkbox"/> Matching existing materials <input type="checkbox"/> Change of materials (EG, replacing asphalt with metal)
<input type="checkbox"/> Gutters	<input type="checkbox"/> New or repair <input type="checkbox"/> Replacement <input type="checkbox"/> Removal	<input type="checkbox"/> Change of materials <input type="checkbox"/> Match existing historic materials (metal, etc.) <input type="checkbox"/> Use new modern materials (vinyl, etc.)
<input type="checkbox"/> Siding	<input type="checkbox"/> Minor repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Change of materials <input type="checkbox"/> Match historic materials (wood, cement board, etc.) <input type="checkbox"/> Use modern materials (plastic, vinyl aluminum, etc.)
<input checked="" type="checkbox"/> Exterior windows and doors	<input type="checkbox"/> Add new <input checked="" type="checkbox"/> Replacement <input checked="" type="checkbox"/> Removal	<input type="checkbox"/> Change in dimension or location (height, length) <input checked="" type="checkbox"/> Match historic materials (wood, metal, glass, etc.) <input type="checkbox"/> Use modern material (plastic, vinyl, aluminum, etc.) <input type="checkbox"/> Removal, covering or alteration of original trim
<input type="checkbox"/> Fences	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Use new modern materials (vinyl, aluminum, etc.) <input type="checkbox"/> Matching historic materials (wood, stone, etc.)
<input checked="" type="checkbox"/> Porch	<input checked="" type="checkbox"/> Minor repair <input checked="" type="checkbox"/> Replacement <input checked="" type="checkbox"/> Removal <input type="checkbox"/> Add new	<input checked="" type="checkbox"/> Match historic material (wood, metal, etc.) <input type="checkbox"/> Use new modern material (plastic, vinyl, aluminum, etc.) <input type="checkbox"/> Column, railing, or skirting <input type="checkbox"/> Decking
<input type="checkbox"/> Sidewalk or paving	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> Recreating <input type="checkbox"/> Matching existing materials <input type="checkbox"/> Other: _____
<input type="checkbox"/> New construction	<input type="checkbox"/> Addition <input type="checkbox"/> New building <input type="checkbox"/> Façade alteration	<input type="checkbox"/> Recreating missing architectural features <input type="checkbox"/> Removing architectural features <input type="checkbox"/> Other: _____
<input type="checkbox"/> Signage and exterior lighting	<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	<input type="checkbox"/> <u>Signage (Complete Sign Permit Application instead).</u> <input type="checkbox"/> Lighting <input type="checkbox"/> New alternative materials <input type="checkbox"/> Matching existing materials
<input checked="" type="checkbox"/> Other	<input type="checkbox"/> New <input type="checkbox"/> Repair <input checked="" type="checkbox"/> Replacement <input checked="" type="checkbox"/> Removal	<input type="checkbox"/> New modern materials <input type="checkbox"/> Match existing materials <input type="checkbox"/> Removal or altering of original architectural details <input checked="" type="checkbox"/> <i>Remove and replace one rotted window divider board on South side porch / Sun room</i>

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:
	Porch / Sunroom on South side - remove and replace rotted window divider board with wood.
	Basement windows - remove rotted side boards and replace with wood.
	Porch / Sunroom - remove rotted siding trim board on SW corner, replace with wood.
	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?
	Yes
	3C If so, summarize any attempts to repair the original materials and attach a contractor estimate that demonstrates the un-reparability of original materials:
	We are replacing rotted wood with new wood. The estimate is attached.

SECTION	SUPPLEMENTAL QUESTIONS
4	4A Will the proposed work alter any of the distinctive features or historic architectural details of the property?
	No.
	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.
	The proposed work will help to maintain the historic property by keeping its structure in good condition.
4C Have you submitted this project for state or federal tax credits?	



**DECISION FORM FOR
CERTIFICATE OF APPROPRIATENESS**
CITY OF EVANSVILLE HISTORIC PRESERVATION COMMISSION
31 S. Madison St, Evansville, WI 53536

This decision form outlines the criteria that is used approve, deny or approve with conditions the proposed work. This form will be completed by the chair of HPC or the Community Development Director.

Certificate of Appropriateness Decision Criteria: The Historic Preservation commission is authorized to grant Certificates of Appropriateness when the standards found in section 62-36(10) of the Municipal Ordinances are met:

- ☐ The proposed work does not have an adverse effect on the immediate site
- ☐ The proposed work does not have an adverse effect on adjacent properties
- ☐ The proposed work does not have an adverse effect on the entire district
- ☐ Historic character is preserved

Additionally, the below decision criteria (as outlined in Wisconsin State Statutes 62.23(7)(em)2m) are required to be met when replacing original windows, siding, or other exterior materials:

- ☐ **Original material is severely or significantly deteriorated as defined by the N.P.S.**
- ☐ **Contractor estimate demonstrates the un-repairability of original materials**
- ☐ **Replacement material is similar in [] design, [] color, [] scale, [] architectural appearance, and [] other visual qualities _____**

Summary of Work:

Certificate of Appropriateness is hereby (check one):

[] **Approved, [] Not approved, or [] Approved with the following conditions:**

Approved by: _____
Community Development Director or HPC Chairperson Signature

Date: _____

HISTORIC PROPERTY INFORMATION

Historic Property Address:	Tax ID Number: 222 _____
Historic Property AHI Number:	Parcel Number: 6-27-_____

Fax 608/882-6533

484-664-0566

Qty.			PRICE	TOTAL
		REMOVE & REPLACE ONE ROTTED WINDOW DIVIDER BOARD - SOUTH SIDE		
		R & R ROTTED BOTTOM SIDING TRIM BD SW CORNER OF PORCH		
		R & R ROTTED SIDE BOARDS ON BASEMENT WINDOWS WINDOW BOARD		
1		1 X 4 X 8 CONSTRUCTION CEDAR	\$6.67	\$6.67
			TAX	\$0.37
			TOTAL	\$7.04
1		PORCH BD 1 X 4 X 10 CONSTRUCTION CEDAR	\$8.33	\$8.33
			TAX	\$0.46
			TOTAL	\$8.79
2		WINDOW SIDES 5/4 X 6 X 16 CONSTRUCTION CEDAR	\$52.00	\$104.00
			TAX	\$5.72
			TOTAL	\$109.72
1		FASTENERS	\$30.00	\$30.00
			TAX	\$1.65
			TOTAL	\$31.65
		MATERIALS		\$157.02
		PERMIT		~ \$265.00 ~
		LABOR		\$640.00
			TOTAL	\$1,062.00
		Thanks Tim		











