City of Sheboygan spirit on the lake	**CITY OF SHEBOYGAN** **ARCHITECTURAL REVIEW APPLICATION**	**Fee:** _____ **Review Date:** _____

Read all instructions before completing. If additional space is needed, attach additional pages.

SECTION 1: Applicant/ Permittee Information

Name (Ind., Org. or Entity)	Authorized Representative	Title	
Rickman Architecture + Design	Rachel Cook	Executive Assistant	
Mailing Address	**City**	**State**	**ZIP Code**
[redacted]	Villa Rica	GA	30180
Email Address		**Phone Number (incl. area code)**	
[redacted]		[redacted]	

SECTION 2: Landowner Information (Complete These Fields When Project Site Owner is Different than Applicant)

Name (Ind., Org. or Entity)	Contact Person	Title	
Weill Center Foundation	Katy Glodosky	Executive Director	
Mailing Address	**City**	**State**	**ZIP Code**
826 N 8th St	Sheboygan	WI	53081
Email Address		**Phone Number (incl. area code)**	
[redacted]		[redacted]	

SECTION 3: Architect Information

Name			
Michael Rickman, Rickman Architecture + Design			
Mailing Address	**City**	**State**	**Zip**
[redacted]	Villa Rica	GA	30180
Email Address		**Phone Number (incl. area code)**	
[redacted]		[redacted]	

SECTION 4: Contractor Information

Name			
Carlos Hernandez, GTO Stucco & Designs, LLC			
Mailing Address	**City**	**State**	**Zip**
[redacted]	Milwaukee	WI	53215
Email Address		**Phone Number (incl. area code)**	
		[redacted]	

SECTION 5: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Architectural Review Application. I certify that the information contained in this form and attachments are true and accurate. I certify that the project will be in compliance with all conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.

Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

Name of Owner/Authorized Representative (please print)	Title	Phone Number
Michael Rickman	Owner, RAD	[redacted]
Signature of Applicant		**Date Signed**
		09/11/2026

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. To be placed on the agenda of the Architectural Review Board, application must be filed three weeks prior to date of meeting – check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee of $100 (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.

SECTION 6: Description of the Subject Site/Proposed Project

Project Address/Description	Parcel No.
816 N 8th St Sheboygan, WI	59281107120

Name of Proposed/Existing Business:	Weill Center Foundation
Address of Property Affected:	816 N 8th St Sheboygan, WI
Zoning Classification:	Central Commercial District

New Building: ☐ Addition: ☐ Remodeling: ☐

SECTION 7: Description of Proposed Project

Scope to include remaining demolition of portions of previously demolished buildings located at 816 N 8th St. The exposed exterior walls on the west facade (facing N 8th Street) and south facade facing adjacent building will be clad in EIFS.

SECTION 8: Description of EXISTING Exterior Design and Materials

The existing Spanish Colonial Revival facade at the Weill center consists of stone veneer, stucco, terracotta roofing and misc steel with storefront glass and mullions.

SECTION 9: Description of the PROPOSED Exterior Design and Materials

The proposed EIFS finish will compliment the existing architectural style and use of stucco already existing.