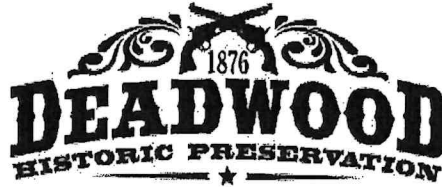


OFFICE OF
 PLANNING, ZONING AND
 HISTORIC PRESERVATION
 108 Sherman Street
 Telephone (605) 578-2082
 Fax (605) 578-2084



FOR OFFICE USE ONLY	
Case No.	<u>230031</u>
<input checked="" type="checkbox"/> Project Approval	
<input type="checkbox"/> Certificate of Appropriateness	
Date Received	<u>5/13/23</u>
Date of Hearing	<u>5/10/23</u>

City of Deadwood Application for Project Approval OR Certificate of Appropriateness

The Deadwood Historic Preservation Commission reviews all applications. Approval is issued for proposed work in keeping with City of Deadwood Ordinances & Guidelines, South Dakota State Administrative Rules and the Secretary of the Interior's Standards for Rehabilitation.

This application must be typed or printed in ink and submitted to:

City of Deadwood
 Deadwood Historic Preservation Office
 108 Sherman Street
 Deadwood, SD 57732

FOR INFORMATION REGARDING THIS FORM, CALL 605-578-2082

PROPERTY INFORMATION
Property Address: <u>57 Forest Drive Deadwood, SD 57732</u>
Historic Name of Property (if known): <u>The HUB house</u>

APPLICANT INFORMATION
Applicant is: <input checked="" type="checkbox"/> owner <input type="checkbox"/> contractor <input type="checkbox"/> architect <input type="checkbox"/> consultant <input type="checkbox"/> other _____

Owner's Name: <u>Noel Fairbairn</u>
Address: <u>57 Forest Drive</u>
City: <u>Deadwood</u> State: <u>SD</u> Zip: <u>57732</u>
Telephone: <u>949-283-3864</u> Fax: _____
E-mail: <u>noeln@cox.net</u>

Architect's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
E-mail: _____

Contractor's Name: <u>Golden Clover LLC</u>
Address: <u>479 Garcia Drive</u>
City: <u>Hemet</u> State: <u>CA</u> Zip: <u>92545</u>
Telephone: <u>7144603014</u> Fax: <u>7149641491</u>
E-mail: <u>goldencloverllc@gmail.com</u>

Agent's Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
E-mail: _____

TYPE OF IMPROVEMENT			
<input checked="" type="checkbox"/> Alteration (change to exterior)	<input type="checkbox"/> New Building	<input type="checkbox"/> Addition	<input type="checkbox"/> Accessory Structure
<input type="checkbox"/> New Construction	<input type="checkbox"/> Re-Roofing	<input type="checkbox"/> Wood Repair	<input type="checkbox"/> Exterior Painting
<input type="checkbox"/> General Maintenance	<input checked="" type="checkbox"/> Siding	<input checked="" type="checkbox"/> Windows	<input checked="" type="checkbox"/> Porch/Deck
<input checked="" type="checkbox"/> Other <u>foundation & Retain</u>	<input type="checkbox"/> Awning	<input type="checkbox"/> Sign	<input type="checkbox"/> Fencing

FOR OFFICE USE ONLY
Case No. _____

ACTIVITY: (CHECK AS APPLICABLE)	
Project Start Date: <u>06-20-2023</u>	Project Completion Date (anticipated): <u>10-20-2023</u>
<input type="checkbox"/> ALTERATION <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear	
<input type="checkbox"/> ADDITION <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear	
<input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> Residential <input type="checkbox"/> Other _____	
<input type="checkbox"/> ROOF <input type="checkbox"/> New <input type="checkbox"/> Re-roofing <input type="checkbox"/> Material <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear <input type="checkbox"/> Alteration to roof	
<input type="checkbox"/> GARAGE <input type="checkbox"/> New <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear	
<input type="checkbox"/> FENCE/GATE <input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear Material _____ Style/type _____ Dimensions _____	
<input checked="" type="checkbox"/> WINDOWS <input checked="" type="checkbox"/> STORM WINDOWS <input checked="" type="checkbox"/> DOORS <input type="checkbox"/> STORM DOORS <input type="checkbox"/> Restoration <input type="checkbox"/> Replacement <input type="checkbox"/> New <input type="checkbox"/> Front <input type="checkbox"/> Side(s) <input type="checkbox"/> Rear Material _____ Style/type _____	
<input checked="" type="checkbox"/> PORCH/DECK <input type="checkbox"/> Restoration <input type="checkbox"/> Replacement <input type="checkbox"/> New <input checked="" type="checkbox"/> Front <input type="checkbox"/> Side(s) <input checked="" type="checkbox"/> Rear Note: Please provide detailed plans/drawings	
<input type="checkbox"/> SIGN/AWNING <input type="checkbox"/> New <input type="checkbox"/> Restoration <input type="checkbox"/> Replacement Material _____ Style/type _____ Dimensions _____	
<input type="checkbox"/> OTHER – Describe in detail below or use attachments	

DESCRIPTION OF ACTIVITY

Describe in detail, the above activity (use attachments if necessary including type of materials to be used) and submit as applicable. Descriptive materials such as photos and drawings are necessary to illustrate the work and to help the commissioners and staff evaluate the proposed changes. Information should be supplied for each element of the proposed work along with general drawings and/or photographs as appropriate.

Failure to supply adequate documentation could result in delays in processing and denial of the request. Describe in detail below (add pages as necessary).

- Replace incorrect windows back to original double hung wood windows 23 units
- Replace 3 Front doors with Wood doors
- Replace 3 screen doors with wood screen doors
- Replace current aluminum front siding with correct period flat board siding and paint.
- Repair/replace House Foundation, front of house is tilting, 2" Gap from wall, seperating from the floor joints
- Replace Front retaining walls with city designed retaining walls, stairs and Patio

FOR OFFICE USE ONLY
Case No. _____

Replace Backyard retaining wall lower RR Tie with cement and rock retaining wall

SIGNATURES

I **HEREBY CERTIFY** I understand this application will not be accepted and processed until all the requested information has been supplied. I realize drawings and measurements must be exact and if errors result in a violation of the Commission's approval, then appropriate changes will have to be made. I also understand this application may require a site visit / additional research by staff and a PUBLIC HEARING by the DEADWOOD HISTORIC PRESERVATION COMMISSION.

I understand this application is for a Certificate of Appropriateness or Project Approval only and that a building permit is required for any uses associated with this location prior to any constructions, alterations, etc. All statements are true to the best of my knowledge and belief.

I understand approval is issued for proposed work in keeping with City of Deadwood Ordinances, South Dakota State Administrative Rules and the Secretary of the Interior's Standards for Rehabilitation and copies are available for my review.

Nancy Noel *June 5/2/23*
SIGNATURE OF OWNER(S) DATE SIGNATURE OF AGENT(S) DATE

SIGNATURE OF OWNER(S) DATE SIGNATURE OF AGENT(S) DATE

SIGNATURE OF OWNER(S) DATE SIGNATURE OF AGENT(S) DATE

APPLICATION DEADLINE

This form and all supporting documentation **MUST** arrive by 5:00 p.m. on the 1st or 3rd Wednesday of every month to be considered at the next Historic Preservation Commission Meeting. The meeting schedule and filing deadlines are on file with the Historic Preservation Office. 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.

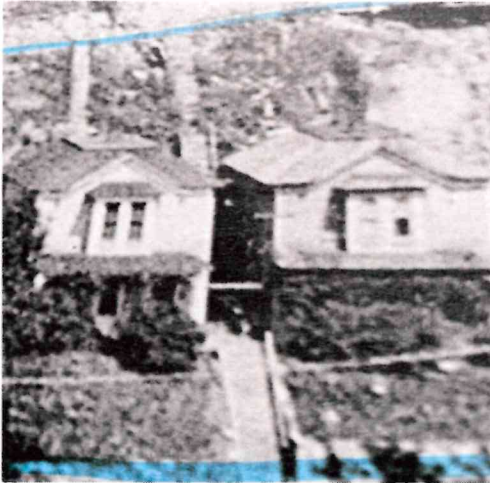
Please use the attached criteria checklist as a guide to completing the application. Incomplete applications cannot be reviewed and will be returned to you for more information. All submitted materials will be retained by the Historic Preservation Office. Do not submit your only copy of any piece of documentation.

The City of Deadwood Historic Preservation Office has numerous resources available for your assistance upon request.

Dear City of Deadwood,

57 Forest Drive house needs a lot of work and the new owner is looking forward to getting it back to its glory days of 1890 when it was built.

In early 1900's the house was owned by Sidney Jacobs the owner of the Hub Clothing stores, so we are calling it the HUB House.



Twin houses early 1900 with box windows and patio cover.

In the 70's the twin houses were connected together to make it one house, and the windows and doors were replaced with more modern product like Aluminum siding and Plastic windows, and they took out the box windows and patio cover.



Last year we did clean-up on the front yard and back yard to make it look more presentable, this year we are planning on finishing up the house to move into it.

We can order the doors and windows, then make the house safe: (see house safety report)

1. the front of the house foundation is sliding downward and it has several inches gap between the floor and the front wall.
2. The retaining wall is collapsing and falling down the hill.
3. The old wooden front patio moves as you walk on it and is not stable, see house inspection details.
4. The rear retaining wall is made of railroad ties and is collapsing into the rear of the house.



After the safety items are complete above we will start working on the making the house back to the original design of the late 1800's

Build the box windows, install the new windows and doors. Then interior updates. We plan on replacing many of the interior doors to the correct 4 panel doors.

Attached are the signed documents, inspection reports, cost summary, plans from city for retaining wall, quotes and cost and plans.