



## Historic Ghost Mural Easement Program Application

Please read the attached Policy Guidelines, Administrative Procedures and provide the requested information.

1. Address of Ghost Mural Location:

51-53-55 Sherman Street

2. Applicant's name & mailing address:

KB Deadwood Sherman St

PO Box 130

Atkinson, NE 68713

Telephone: (402) 925-5113

E-mail gerard@keatingresources.com

3. Owner of property – (if different from applicant):

KB Deadwood Sherman St. 2020 LLC

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

E-mail \_\_\_\_\_

4. Describe the proposed mural(s) and specific location(s) on building (additional information may be attached).

South side of 55 Sherman St - The Adams Co. Wholesale Grocers

East side of 55 Sherman St - Webster

East side of 53 Sherman St - Adam Co.

North side of 53 Sherman St - on interior of the North building. The original sign of the original 2-story building at 53 Sherman.

5. Required Supporting Documentation

a. Complete an Application for Certificate of Appropriateness and submit with application including:

- Current and historic photos of the building and ghost mural(s)
- Legal Description of the ghost mural(s) historic structure

b. Acknowledgement of Ghost Mural Easement Program.

6. Certification

I certify all information contained in this application and all information furnished in support of this application is given for the purpose of obtaining a ghost mural easement as true and complete to the best of my knowledge and belief. I acknowledge I have read the policy guidelines for the program included with and for this application and agree to all of the terms and conditions contained in the policy guidelines. I agree to indemnify and hold harmless the Deadwood Historic Preservation Commission and the City of Deadwood against losses, costs, damages, expenses and liabilities of any nature directly or indirectly resulting from or arising out of or relating to the Deadwood Historic Preservation Commission's acceptance, consideration, approval, or disapproval of this application and the issuance or non-issuance of a ghost mural easement.

Applicant's signature: Arena Sandidge

Date submitted: 1/20/23

Owner's signature: \_\_\_\_\_

Date submitted: \_\_\_/\_\_\_/\_\_\_

Please return the completed application along with the Certificate of Appropriateness to:

City of Deadwood  
Planning, Zoning & Historic Preservation  
108 Sherman Street  
Deadwood, SD 57732  
605-578-2082