OFFICE OF
PLANNING, ZONING AND
HISTORIC PRESERVATION

108 Sherman Street Telephone (605) 578-2082 Fax (605) 578-2084



FOR OFFICE	USE	ONLY
Case No. 250	2/19	)
☐ Project Approv	al	
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☐ Certificate of A	ppropr	iateness
Date Received	ppropr /	iateness /

## 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

PROPERT	YINFORMATION				
Property Address: 325 Mann					
Historic Name of Property (if known): Grace Lutheran Church					
APPLICANT INFORMATION					
Applicant is: Owner Contractor Carchitect Cor	nsultantother				
Owner's Name: <u>Carace Cutheran</u> Charc	Architect's Name:				
City:	City: State: Zip:				
Telephone: Fax:	Telephone: Fax:				
E-mail:	E-mail:				
Contractor's Name: High Philus Remodel	Agent's Name:				
Address:	Address:				
City:State:Zip:	City: State: Zip:				
Telephone: Fax:	Telephone: Fax:				
E-mail:	E-mail:				
TYPE OF IMPROVEMENT					
	Addition Accessory Structure				
	Wood Repair Exterior Painting				
Siding	Windows Porch/Deck				
OtherAwning	Sign Fencing				

FOR (	<b>OFFICE</b>	USE O	NLY
Case No			

ACTIVITY: (CHECK AS APPLICABLE)				
Project Start Date:	Project Completion Date (anticipated):			
ALTERATION	Front Side(s) Rear			
ADDITION	Front Side(s) Rear			
NEW CONSTRUCTION	Residential Other			
ROOF	New       Re-roofing       Material         □Front       Side(s)       Rear       Alteration to roof			
□GARAGE	New Rehabilitation Front Side(s) Rear			
FENCE/GATE	New     □Replacement       □Front     □Side(s)     □Rear			
	Style/typeDimensions			
windowsstor	M WINDOWS DOORS STORM DOORS  Restoration Replacement New Front Side(s) Rear			
Material	Style/type			
PORCH/DECK	Restoration Replacement New  Front Side(s) Rear			
_	detailed plans/drawings			
SIGN/AWNING  Material	New Restoration Replacement Style/type Dimensions			
	etail below or use attachments			
- Describe in detail below of 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).				
Paint Garage and replace existing garage doors with metal door, same design				

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## **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.

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 1<sup>st</sup> or 3<sup>rd</sup> 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.

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