OFFICE OF PLANNING, ZONING AND HISTORIC PRESERVATION 108 Sherman Street

Telephone (605) 578-2082 Fax (605) 578-2084

FOR OFFICE USE ONLY Case No. 220184

☐ Project Approval

Certificate of Appropriateness Date Received 11/30/22

Date of Hearing 12/14/2

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	TY INFORMATION
Property Address: 677 Main	Tree 1
Historic Name of Property (if known):	iv Black
APPLICANT I	NFORMATION
Applicant is: owner contractor architect co	onsultantother
Owner's Name: Gary King	Architect's Name:
Address: 11962 Bis Pincy Rd.	Address:
City: Sturyis State: 50 zip: 57785	City: State: Zip:
Telephone: 462 871 8778 Fax:	Telephone: Fax:
E-mail: gry @ rushmore gaming, com	E-mail:
Contractor's Name: Swaney Flectric	Agent's Name:
Address: 2120 Hillsview	Address:
city: <u>Belle Favdstate</u> : <u>SD</u> zip: 57717	City: State: Zip:
Telephone: <u>605645733</u> Fax:	Telephone: Fax:
E-mail:	E-mail:
TYPE OF IM	PROVEMENT
Alteration (change to exterior)	
New Construction New Building	Addition Accessory Structure
	Wood Repair Exterior Painting
Nother Light Addition Dawning	Windows Porch/Deck
XOther LIGht Addition Mayning [Sign Fencing

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	ACTIVITY: (CHECK AS APPLICABLE)			
Project Start Date:	Project Completion Date (anticipated):			
ALTERATION	Front Side(s) Rear			
ADDITION	Front Side(s) Rear			
NEW CONSTRUCTION	N 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)			
Material	Style/type Dimensions			
□windows □sto	RM WINDOWS DOORS STORM DOORS Restoration Replacement New Front Side(s) Rear			
Material	Style/type			
PORCH/DECK	Restoration Replacement New			
Note: Please provide	detailed plans/drawings			
	New Restoration Replacement			
Material	Style/type Dimensions			
XOTHER – Describe in	letail below or use attachments			
Market Control	DESCRIPTION OF ACTIVITY			
commissioners and staff e	e activity (use attachments if necessary including type of materials to be used) and submit as erials such as photos and drawings are necessary to illustrate the work and to help the aluate the proposed changes. Information should be supplied for each element of the proposed awings and/or photographs as appropriate.			
Failure to supply adequate below (add pages as neces	documentation could result in delays in processing and denial of the request. Describe in detail ary).			
Adding 4 front of above a	small blue lights to accent the the building. Very discretely placed lecorative awning, hardly noticable	_		
trom 5.	reet.	- -		

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Case No			

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

ALL	11/30/22		
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.



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