OFFICE OF
PLANNING, ZONING AND
HISTORIC PRESERVATION

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



FOR OFFICE USE ONLY
Case No. 20186

Project Approval
Certificate of Appropriateness

Date Received /2/08/22 Date of Hearing |2/14/22

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 | Y INFORMATIO | ON | | | |
| Property Address: 715 M | ain St. Do | eabwood | SD (Deadwood Tobaccold) | | | |
| Historic Name of Property (if known |): | | | | | |
| | APPLICANT I | NFORMATION | | | | |
| Applicant is: Owner contractor | | onsultant other | | | | |
| Owner's Name: Bill Recter Address: 20067 Ridge City: Splatfish state: SD Telephone: 419-344-4043Fax: E-mail: Wildbill dtc Ciclo | field ip zip57183 | Address: | FOUR FRONTS Design Inc ty state: SD zip:5778/ 159-3151 Fax: | | | |
| Contractor's Name: FNG PRIOR Address: 114 Industria City: Guilberts state: It Telephone: 847-931-1600 Fax: E-mail: De Abuen 20WCF | 1 21p: 60136 847.931-1716 | Address: | State:Zip: | | | |
| TYPE OF IMPROVEMENT | | | | | | |
| Alteration (change to exterior) New Construction General Maintenance | New Building | Addition Wood Repair Windows | Accessory Structure Exterior Painting Porch/Deck | | | |

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| ACTIVITY: (CHECK AS APPLICABLE) | | | | | | | | |
|---|------------------------------------|---|--|--|--|--|--|--|
| Project Start Date: 91122 | | Project Completion Date (anticipated): 11523 | | | | | | |
| ALTERATION | Front | Side(s) Rear | | | | | | |
| ADDITION | Front | Side(s) Rear | | | | | | |
| NEW CONSTRUCTION | NEW CONSTRUCTION Residential Other | | | | | | | |
| ROOF | New Front | Re-roofing Material Side(s) Rear Alteration to roof | | | | | | |
| GARAGE | □New □Front | Rehabilitation Side(s) Rear | | | | | | |
| FENCE/GATE | □ New □ Front | Replacement Side(s) Rear | | | | | | |
| Material | | Style/type Dimensions | | | | | | |
| □windows □stor | M WINDOWS Restoration | ion Replacement New Side(s) Rear | | | | | | |
| Material | | Style/type | | | | | | |
| PORCH/DECK ☐ Restoration ☐ Replacement ☐ New ☐ Front ☐ Side(s) ☐ Rear Note: Please provide detailed plans/drawings | | | | | | | | |
| SIGN/AWNING | П. | Restoration Replacement | | | | | | |
| | - | Style/type Dimensions | | | | | | |
| OTHER – Describe in d | | | | | | | | |
| F | | | | | | | | |
| 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). | | | | | | | | |
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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.

| for my review. | | | |
|-----------------------|---------|-----------------------|------|
| West | 12/7/22 | | |
| SIGNATURE OF OWNER(S) | DATE | SIGNATURE OF AGENT(S) | DATE |
| | 12/7/22 | | |
| SIGNATURE OF OWNER(S) | Daté | 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.