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>ABOO4</u>

Project Approval

Certificate of Appropriateness

Date Received <u>51/51/23</u>

Date of Hearing <u>51/24</u>123

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

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PROPER	PROPERTY INFORMATION							
Property Address: 621 MAIN S	ST (THE LUCKY HORSE)							
Historic Name of Property (if known):								
APPLICANT INFORMATION								
Applicant is:	consultant							
Owner's Name: TODD WEBER	Architect's Name:							
Address: 621 MAIN ST	Address:							
City: Dead wead State: 5D zip: 57732	City: State: Zip:							
Telephone: 65641697Fax:	Telephone: Fax:							
E-mail: THE LUCKY HORSE LLC C gmille E-mail:								
Contractor's Name: Self Agent's Name:								
Address:	Address:							
City: State: Zip:	City: State: Zip:							
Telephone: Fax:	Telephone: Fax:							
E-mail:	E-mail:							
TYPE OF INAPPOVENACALT								
TYPE OF IMPROVEMENT								
Alteration (change to exterior)	□ Addition □ Accessory Structure							
□ New Construction □ New Building □ General Maintenance □ Re-Roofing	☐ Addition ☐ Accessory Structure ☐ Wood Repair ☐ Exterior Painting							
General Maintenance	☐ Windows ☐ Porch/Deck							
Other Bild OP of Awning	☐ Sign ☐ Fencing							
FACADE								

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ACTIVITY: (CHECK AS APPLICABLE)							
Pro	ject Start Date: <u>ASA</u>	<u> </u>	Project Com	oletion Date (ar	nticipated):		
Ø	ALTERATION	☑ Front	☐ Side(s)	□ Rear			
	ADDITION	☐ Front	☐ Side(s)	□ Rear			
	NEW CONSTRUCTION	☐ Residenti	al 🗆 Other				
	ROOF	□ New	☐ Re-roofing	g 🗆 Materia	al		
		☐ Front	☐ Side(s)	☐ Rear	☐ Alteration	n to roof	
	GARAGE	□ New	☐ Rehabilita	tion			
		☐ Front	☐ Side(s)	Rear			
	FENCE/GATE	□ New	☐ Replacem	ent			
		☐ Front	☐ Side(s)	□ Rear	ê		
	Material		Style/type	Dim	ensions		
	WINDOWS ☐ STORM	WINDOWS	□ DOORS	☐ STORM D	OORS		
		☐ Restorati	on	☐ Replacem	ent	☐ New	
		☐ Front	☐ Side(s)	☐ Rear			
	Material		Style/type				
	PORCH/DECK	☐ Restorati		☐ Replacem	ent	□ New	
	N	☐ Front	☐ Side(s)	□ Rear			
	Note: Please provide o						
	SIGN/AWNING			on 🗆 Replacem			
-					1611310113		
Ď,	OTHER – Describe in de	etail below or	use attachmen	is		-	
			DESCRIP	TION OF A	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).							
	Build U	7 of 5	FACADE	= +0	ne	et	Sigh ordinance
	Requireme	unts	to	Bring			nt up to Heigh
_	of sign.	wh	en sig	in wa	is Des	signe	L I DID NOT
_	LONOW OF	- the	et f	art o	f the	ord	inance
_	INSTEAD C	of Ren	roving	and c	rebuile	J	the entire sign
an easier and cheaper fix will be to Raise the							
Pa	age 2 of 3		, , , , , ,	~ TH	work		Updated October 9, 2019

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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.

9	5-15-2	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.

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Dotted lines = New Facade Solid lines = Current Store





