# OFFICE OF PLANNING, ZONING AND HISTORIC PRESERVATION

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



FOR OFFICE	USE ONLY
Case No	
☐ Project Approval	
☐ Certificate of Ap	propriateness
Date Received	//
Date of Hearing	//

### 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

Dead			
FOR INFORMATION REGAR	DING THIS FORM, CALL 605-578-2082		
PROPE	ERTY INFORMATION		
Property Address:57 1/2 Sherman Street			
Historic Name of Property (if known):			
APPLICAN	IT INFORMATION		
Applicant is: owner contractor architect	consultant other		
Owner's Name: Gerard Keating	Architect's Name:		
Address: 57 Sherman Street	Address:		
City: Deadwood State: SD Zip: 57783	City: State: Zip:		
Telephone: 402-925-5113 Fax:	Telephone: Fax:		
E-mail: gerard@keatingresources.com	E-mail:		
Contractor's Name: HGH Construction LLC	Agent's Name:		
Address: po box 1213	Address:		
City: Spearfish State: sd Zip: 57783	. City: State: Zip:		
Telephone: 605-641-5808 Fax:	Telephone: Fax:		
E-mail: quentin@hgh-construction.com	E-mail:		
TYPE OF IMPROVEMENT			
Alteration (change to exterior)			
New Construction	Addition Accessory Structure		
General Maintenance Re-Roofing Siding			
Other Awning	Sign Fencing		

FOR OFFICE USE ONLY
Case No

		ACTIVITY:	(CHECK AS APPLIC	CABLE)
Project Start Date: 11/25/202	24	Project Comple	tion Date (anticipa	ated): <u>12/06/2024</u>
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 Front	Rehabilitation		
FENCE/GATE	New	Replacemen		
	Front	Side(s)	Rear	
Material	Sty	yle/type	Dimensio	ns
□windows □storm \	windows	DOORS [	STORM DOORS	
	Restoration	ո [	Replacement	New
_		Side(s)		
Material	Sty	yle/type		
PORCH/DECK	Restoration	n [		✓New
_	Front		Rear	
Note: Please provide deta	ailed plans/d	rawings		
_ · · -	New	Restoration		
			Dimensio	ons
OTHER – Describe in deta	all below or us	se attachments		
		DESCRIPTI	ON OF ACTI	IVITY
applicable. Descriptive materia	als such as ph ate the propo	otos and drawir osed changes. In	gs are necessary to formation should I	type of materials to be used) and submit as o illustrate the work and to help the be supplied for each element of the proposed
Failure to supply adequate doo below (add pages as necessary		could result in d	elays in processing	g and denial of the request. Describe in detail
Will be adding a Deck/ La	anding to a	ccess back a	partment unit a	t 57 Sherman street

Page 2 of 3

FOR OFFICE USE ONLY	
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.

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  $1^{st}$  or  $3^{rd}$  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.

Page 3 of 3 Updated October 9, 2019

## Criteria Checklist for Project Approval OR Certificate of Appropriateness

### **SUBMITTAL CRITERIA CHECKLIST**

The documentation listed below will assist in the submission of the application. **Not all information listed below is** required for each project. In order to save time and effort, please consult with the Historic Preservation Office prior to completing your application.

prior	to completing your application.
ALL W	/ORK:
	Photograph of house and existing conditions from all relevant sides.
RENC	VATIONS AND ADDITIONS:
	Elevation and plan drawings to scale indicating proposed alterations or additions, clearly indicating the existing building and what is proposed and including the relationship to adjacent structures. Make sure to include door and window design if altered. Manufacturer's catalog data may be used, if applicable.
	Exterior material description.
	Site plan showing dimensions of lot and location of existing building(s) or structure(s) on lot, location of additions, dimensions of existing structure and additions. (Show use of addition and location of windows and doors if applicable.)
	Photograph of existing conditions from all elevations.
	Color samples and placement on the structure.
	Historic photographs should accompany any request to return a structure to an earlier historic appearance. (Please note our archives may be of great assistance)
MATE	ERIAL CHANGES:
	Written description of area involved.
	Color photographs or slides of areas involved and surrounding structures if applicable.
	Sample or photo of materials involved.
PAIN <sup>-</sup>	FING, SIDING:
	Color photographs of all areas involved and surrounding structures if applicable.
	3 Samples of colors and/or materials to be used.
	Dimensioned elevation and section to scale, showing design of fence, material, and height in relationship to adjacent structures.
NEW	CONSTRUCTION:
	Elevation drawings to scale showing all sides and dimensions. Elevation drawings to scale showing relationship to structures immediately adjacent.
	Photograph of proposed site and adjacent buildings on adjoining properties.
L	Site plan including building footprint and location of off-street parking showing setbacks. Include number of spaces, surface material, screening and all other information required under Parking Areas.
	Material list including door and window styles, colors and texture samples.
	Scale model indicating significant detail. (This may be required for major construction. Please consult Historic Preservation Commission staff.)
	Color photographs of proposed site and structures within vicinity of new building.





