



**FOR OFFICE USE ONLY**

Case No. \_\_\_\_\_  
☐ Project Approval  
☐ Certificate of Appropriateness  
 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

FOR INFORMATION REGARDING THIS FORM, CALL 605-578-2082

### PROPERTY INFORMATION

Property Address: 647, 645, and 653 Main Street, Deadwood, SD 57732

Historic Name of Property (if known):

### APPLICANT INFORMATION

Applicant is: ☐ owner ☐ contractor ☐ architect ☐ consultant ☒ other Owner Representative

Owner's Name: Heath Dotson  
 Address: 715 Market Street  
 City: Chattanooga State: TN Zip: 37402  
 Telephone: (423) 742-0749 Fax: \_\_\_\_\_  
 E-mail: heath.dotson@noondevelopment

Architect's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Agent's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

### TYPE OF IMPROVEMENT

- |   |                                       |                                      |  |
|---|---------------------------------------|--------------------------------------|--|
| <input checked="" type="checkbox"/> Alteration (change to exterior) | <input type="checkbox"/> New Building | <input type="checkbox"/> Addition    | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> New Construction                           | <input type="checkbox"/> Re-Roofing   | <input type="checkbox"/> Wood Repair | <input type="checkbox"/> Exterior Painting   |
| <input type="checkbox"/> General Maintenance                        | <input type="checkbox"/> Siding       | <input type="checkbox"/> Windows     | <input type="checkbox"/> Porch/Deck          |
| <input checked="" type="checkbox"/> Other <u>Brick pointing</u>     | <input type="checkbox"/> Awning       | <input type="checkbox"/> Sign        | <input type="checkbox"/> Fencing             |

**ACTIVITY:** (CHECK AS APPLICABLE)Project Start Date: 5/21/2025Project Completion Date (anticipated): 6/3/2025☐ **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  
Material \_\_\_\_\_ Style/type \_\_\_\_\_ Dimensions \_\_\_\_\_☐ **WINDOWS** ☐ **STORM WINDOWS** ☐ **DOORS** ☐ **STORM DOORS**  
☐ Restoration ☐ Replacement ☐ New  
☐ Front ☐ Side(s) ☐ Rear  
Material \_\_\_\_\_ Style/type \_\_\_\_\_☐ **PORCH/DECK** ☐ Restoration ☐ Replacement ☐ New  
☐ Front ☐ Side(s) ☐ Rear

Note: Please provide detailed plans/drawings

☐ **SIGN/AWNING** ☐ New ☒ Restoration ☐ Replacement  
Material \_\_\_\_\_ Style/type \_\_\_\_\_ Dimensions \_\_\_\_\_☒ **OTHER** – Describe in detail below or 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).

The brick on the back side of the above-mentioned properties was failing in certain areas. Bloody Nose

Saloon hired Julian Brown Eyes of Competitive Masonry to re-point the brick and replace a few sections

where the brick was crumbling/already fallen out. These areas were not large - maybe 4'x4' in the most

severe areas. The replacement bricks used were from the city's recycled pile of historic brick.


Work is completed as 6/3/2025 and we do not anticipate any further improvements.

## 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.

 6/3/2025  
 \_\_\_\_\_  
 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.

# 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.***

### ALL WORK:

- ☐ Photograph of house and existing conditions from all relevant sides.

### RENOVATIONS 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)

### MATERIAL CHANGES:

- ☐ Written description of area involved.
- ☐ Color photographs or slides of areas involved and surrounding structures if applicable.
- ☐ Sample or photo of materials involved.

### PAINTING, SIDING:

- ☐ Color photographs of all areas involved and surrounding structures if applicable.
- ☐ 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.
- ☐ 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.







