OFFICE OF PLANNING, ZONING AND HISTORIC PRESERVATION

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

House



FOR OFFICE USE ONLY

Case No. <u>210196</u>

Project Approval

Date Received 9/30/21
Date of Hearing /0/13/21

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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	PROPERT	TY INFORMATION	NC	7
Property Address: 74 CL	IFFST. DEAD	WOOD, 5D 5,	7732	92
Historic Name of Property (if kno	/			
s built in 1895. W.S. I	tardina ran a	draw service	Cotiveen Lead & De	rdivoid tr
		NFORMATION		
Applicant is: ☑ owner ☐ contra				
		Affection		***************************************
Owner's Name: LINDA BK	YANT	Architect's Name:		
Address: 74 CUFF ST	1	Address:		
City: DEADWOOD State: S	D_Zip: <u>57732</u>	City:	State: Zip:	**************************************
Telephone: (45) 132-7474 Fax: 1/A		Telephone:	Fax:	
E-mail: Lindabryant60	segmail.com	E-mail:		
Contractor's Name: TW/N CIT	Y CONSTRUCTION	Agent's Name:		
Address: <u>5/8</u> CLIFF	5T.	Address:		
City: <u>DEA.DWOOD</u> State: <u>S</u>	D_Zip: <u>57732</u>	City:	State: Zip:	
Telephone: (605)920-8372Fax:		Telephone:	Fax:	
E-mail: twincityrsw@c	mail.com	E-mail:		
	TYPE OF IN	IPROVEMENT		
☐ Alteration (change to exterio	or)			
☐ New Construction	☐ New Building	☐ Addition	☐ Accessory Structure	e
☐ General Maintenance	☐ Re-Roofing	☐ Wood Repair	☐ Exterior Painting	
□ Other	Siding	Windows	☐ Porch/Deck	
LI OUIEI	☐ Awning	☐ Sign	☐ Fencing	

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	***************************************		a 00012 (1002	
			ACTIVITY	Y: (CHECK AS APPLICABLE)
Project Start Da	ate:		Project Comp	pletion Date (anticipated):
☐ ALTERATIO	ON	☐ Front	☐ Side(s)	☐ Rear
☐ ADDITION		☐ Front	□ Side(s)	□ Rear
☐ NEW CON	STRUCTION	☐ Residentia	I □ Other	
□ ROOF		□ New	☐ Re-roofing	
		☐ Front	□ Side(s)	☐ Rear ☐ Alteration to roof
☐ GARAGE		□ New	☐ Rehabilitat	tion
	****	☐ Front	☐ Side(s)	☐ Rear
☐ FENCE/GA	NTE	□ New	☐ Replaceme	ent
		☐ Front	☐ Side(s)	□ Rear
Material_		S1	yle/type	Dimensions
WINDOW:	s 🗹 storm	WINDOWS E	DOORS	t√storm doors
		☐ Restoratio	n	☐ Replacement ☐ New
		☐ Front	☐ Side(s)	☐ Rear
Material _		S1	yle/type	
☐ PORCH/DI	ECK	☐ Restoratio	n	☐ Replacement ☐ New
		☐ Front	☐ Side(s)	☐ Rear
		etailed plans/o	***************************************	
1				on 🛘 Replacement
				Dimensions
□ OTHER – □	Describe in de	etail below or u	ise attachment	is .
		***************************************	DESCRIDI	TION 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). Take out & Replace (25) Windows & trim INSULATE OVER Siding Side & Frim OVER (USulation UNSULATION UNSULATION				
744-11-11-11-11-11-11-11-11-11-11-11-11-1		***************************************		

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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.

Luda a	. Bryant 91	30/2021	
SÍGNÁTURE 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.

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

	d for each project. In order to save time and effort, please consult with the Historic Preservation Office completing your application.
ALL WO	DRK:
	Photograph of house and existing conditions from all relevant sides.
RENOV	ATIONS 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)
MATER	RIAL CHANGES:
	Written description of area involved.
	Color photographs or slides of areas involved and surrounding structures if applicable.
	Sample or photo of materials involved.
PAINTI	NG, 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 C	ONSTRUCTION:
	Elevation drawings to scale showing all sides and dimensions. Elevation drawings to scale showing relationship to structures immediately adjacent.
	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.