#### OFFICE OF PLANNING, ZONING AND HISTORIC PRESERVATION

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



| FOR OFFICE<br>Case No. | USE    | ONLI     |
|------------------------|--------|----------|
| Project Approva        |        | iateness |
| Date Received          | /<br>/ | /        |
| Date Hoodelled         |        |          |

## 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

| .0.  | FOR INFORMATIO    | AL DECARDIN         | C TILLS FORM CAL                                   | . COE E70 2002                     |        |
|--|-------------------|---------------------|--|------------------------------------|--------|
|  | FOR INFORMATIO    | IN REGARDIN         | G THIS FORM, CAL                                   | L 605-578-2082                     |        |
|  |                   | PROPERT             | TY INFORMAT  | TION                               |        |
| Property Address:  | 49 7              | Perra e             | St   | Readwood                           |        |
| Historic Name of Proper  | ty (if known):    |                     |  |                                    |        |
| 1  | API               | PLICANT             | INFORMATIO   | N                                  |        |
| Applicant is: Downer   | □ contractor □ ar | chitect 🗆 co        | onsultant 🗆 other                                  |                                    |        |
| 1  | 0.1               |                     |  |                                    |        |
|  |                   |                     | Architect's Name                                   | a:                                 |        |
|  |                   |                     | Address:   |                                    |        |
|  |                   |                     |  |                                    |        |
|  |                   |                     | City:  | State:                             | _ Zip: |
|  |                   |                     | Telephone:   | Fax:                               |        |
|  |                   |                     |  |                                    |        |
|  |                   |                     | E-mail:  | <u> </u>                           |        |
|  |                   |                     | Agent's Name                                       |                                    |        |
|  |                   |                     | Agent's Name:                                      |                                    |        |
|  |                   |                     | Address:   |                                    |        |
|  |                   |                     | City   | State:                             | Zin:   |
|  |                   |                     | City.  | State                              | _ 216  |
|  |                   |                     | Telephone:   | Fax:                               |        |
|  |                   |                     | E maile  |                                    |        |
|  |                   |                     | E-mail:  |                                    |        |
|  | -                 | OF OF IN            | ADDOVERACED!                                       |                                    |        |
| /  |                   | THE OF IN           | 1PROVEMENT   |                                    |        |
| Alteration (change   |                   | n "."               | - Addisin-   | П A 61-                            |        |
| <ul><li>□ New Construction</li><li>□ General Maintenar</li></ul> |                   | Building<br>loofing | <ul><li>□ Addition</li><li>□ Wood Repair</li></ul> | ☐ Accessory Str<br>☐ Exterior Pain |        |
| General Maintenar  | ice Li ke-k       |                     | Windows  | □ Porch/Deck                       | uii g  |
| Other  | Awn               | -                   | Sign   | ☐ Fencing                          |        |

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| _  |   |  | ACTIVITY   | (CHECK AS APPLICABLE)  |   |
|--|---|--|--|--|---|
| Project Start Date: Project Completion Date (anticipated): |   |  |  |  |   |
|  | ALTERATION  | ☐ Front  | ☐ Side(s)  | □ Rear   |   |
|  | ADDITION  | ☐ Front  | ☐ Side(s)  | □ Rear   |   |
|  | NEW CONSTRUCTION  | ☐ Residentia   | al 🗆 Other   |  |   |
|  | ROOF  | □ New  | ☐ Re-roofing   | ☐ Material   |   |
|  |   | ☐ Front  | ☐ Side(s)  | ☐ Rear ☐ Alteration to roof  |   |
|  | GARAGE  | □ New  | ☐ Rehabilita   | on   |   |
|  |   | ☐ Front  | ☐ Side(s)  | □ Rear   |   |
|  | FENCE/GATE  | □ New  | ☐ Replacem   | nt   |   |
|  |   | ☐ Front  | ☐ Side(s)  | □ Rear   |   |
|  | Material  | s  | tyle/type  | Dimensions   | <del></del>   |
| X  | WINDOWS ☐ STORM   | WINDOWS  | □ DOORS  | ☐ STORM DOORS  |   |
|  |   |  | on   | Replacement  |   |
|  |   | 173  | Side(s)  | 🛕 Rear   |   |
|  | Material  | s  | style/type   |  |   |
|  | PORCH/DECK  | ☐ Restoration  | on   | ☐ Replacement ☐ New  |   |
|  |   | ☐ Front  | ☐ Side(s)  | ☐ Rear   |   |
|  |   |  |  | L real   |   |
|  | Note: Please provide o  | letailed plans/  | drawings   |  | -17   |
| _  | SIGN/AWNING   | detailed plans/  | drawings   | n □ Replacement  |   |
|  | SIGN/AWNING Material  | detailed plans/  | drawings  Restoration  | n□ Replacement Dimensions  |   |
|  | SIGN/AWNING   | detailed plans/  | drawings  Restoration  | n□ Replacement Dimensions  |   |
|  | SIGN/AWNING Material  | detailed plans/  | drawings  Restoration  Gtyle/type  use attachment  | n □ Replacement Dimensions   |   |
| Des app  | SIGN/AWNING  Material  OTHER – Describe in describe in describe in detail, the above olicable. Descriptive mate   | etailed plans/ New etail below or e activity (use erials such as paluate the pro | Restoration of the control of the co | Pipelacement Dimensions Dimension | e used) and submit as<br>and to help the                            |
| Des app cor wo   | SIGN/AWNING  Material  OTHER – Describe in describe in detail, the above olicable. Descriptive materials and staff every rk along with general drawn and staff every rk along with the staff every rk | e activity (use erials such as paluate the propositions and/ordocumentatio       | Restoration in the control of the co | Pipelacement Dimensions Dimension | e used) and submit as<br>and to help the<br>element of the proposed |
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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



| SIGNATURE OF AGENT(S) | DATE |
|-----------------------|------|
| SIGNATURE OF AGENT(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.

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# **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

| 100 m |      | for each project. In order to save time and effort, please consult with the Historic Preservation Office completing your application.   |
|-------|------|---|
| ALL 1 | wo   | RK:   |
|       |      | Photograph of house and existing conditions from all relevant sides.  |
| REN   | OVA  | 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)  |
| MAT   | ΓERI | AL CHANGES:   |
|       |      | Written description of area involved.   |
|       |      | Color photographs or slides of areas involved and surrounding structures if applicable.   |
|       |      | Sample or photo of materials involved.  |
| PAI   | NTIN | 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.   |
| NEV   | v co | ONSTRUCTION:  |
|       |      | 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.  |