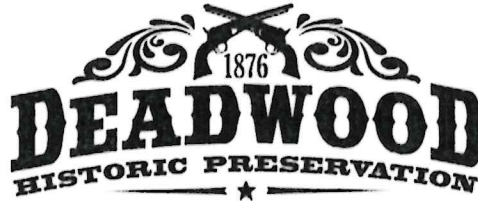


OFFICE OF
**PLANNING, ZONING AND
 HISTORIC PRESERVATION**
 108 Sherman Street
 Telephone (605) 578-2082
 Fax (605) 578-2084



FOR OFFICE USE ONLY	
Case No.	_____
<input type="checkbox"/> Project Approval	
<input type="checkbox"/> 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: <u>69 SHERMAN ST.</u>
Historic Name of Property (if known):

APPLICANT INFORMATION
Applicant is: <input checked="" type="checkbox"/> owner <input type="checkbox"/> contractor <input type="checkbox"/> architect <input type="checkbox"/> consultant <input type="checkbox"/> other _____

Owner's Name: <u>BLACK HILLS NOVELTY LLC</u>
Address: <u>MICHAEL TRUCANO</u> <u>909 MAIN</u>
City: <u>DEADWOOD</u> State: <u>SD</u> Zip: <u>57732</u>
Telephone: <u>6056415111</u> Fax: _____
E-mail: <u>TRUCANO MIKE@GMAIL.COM</u>

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

Contractor's Name: <u>LUIS TERRONES</u>
Address: _____
City: _____ State: _____ Zip: _____
Telephone: <u>307-378-0464</u> Fax: _____
E-mail: _____

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

TYPE OF IMPROVEMENT
<input 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 checked="" type="checkbox"/> Siding <input type="checkbox"/> Windows <input type="checkbox"/> Porch/Deck <input type="checkbox"/> Other _____ <input type="checkbox"/> Awning <input type="checkbox"/> Sign <input type="checkbox"/> Fencing

ACTIVITY: (CHECK AS APPLICABLE)			
Project Start Date: <u>ASAP</u>		Project Completion Date (anticipated): <u>BEFORE SNOW FLIES</u>	
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
<input type="checkbox"/> ADDITION	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> Residential	<input type="checkbox"/> Other _____	
<input type="checkbox"/> ROOF	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Re-roofing	<input checked="" type="checkbox"/> Material
	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear <input type="checkbox"/> Alteration to roof
<input type="checkbox"/> GARAGE	<input type="checkbox"/> New	<input type="checkbox"/> Rehabilitation	
	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
<input type="checkbox"/> FENCE/GATE	<input type="checkbox"/> New	<input type="checkbox"/> Replacement	
	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
Material _____ Style/type _____ Dimensions _____			
<input type="checkbox"/> WINDOWS	<input type="checkbox"/> STORM WINDOWS	<input type="checkbox"/> DOORS	<input type="checkbox"/> STORM DOORS
	<input type="checkbox"/> Restoration	<input type="checkbox"/> Replacement	<input type="checkbox"/> New
	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
Material _____ Style/type _____			
<input type="checkbox"/> PORCH/DECK	<input type="checkbox"/> Restoration	<input type="checkbox"/> Replacement	<input type="checkbox"/> New
	<input type="checkbox"/> Front	<input type="checkbox"/> Side(s)	<input type="checkbox"/> Rear
Note: Please provide detailed plans/drawings			
<input type="checkbox"/> SIGN/AWNING	<input type="checkbox"/> New	<input type="checkbox"/> Restoration	<input type="checkbox"/> Replacement
	Material _____ Style/type _____ Dimensions _____		
<input type="checkbox"/> 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).

MECHANICAL PENTHOUSE ON BUILDING ROOF THAT HOUSES ELEVATOR

HAS BAD ROOF AND SIDING. WATER IS POURING INTO BUILDING.

WANT TO REPLACE OLD ROLLED ROOFING WITH METAL. COLOR AND

PANEL STYLE AT DISCRETION OF DEADWOOD HISTORIC COMMISSION

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 9-10-24

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.

605 ✓ 720 4632 *Clancy*

SUNDANCE CUSTOM STEEL 29 GAUGE TRIM - LENGTH 10'-2" SOME COLORS AVAILABLE IN 26 GA MATERIAL

RIDGE CAP 7" 8" 9" 10" 	HIP RIDGE 12 x Provide Roof Pitch - X 5 1/2" 5 1/2" 1/2" 1/2"
PEAK TRIM 4" 6" 	"W" VALLEY (x=9") (x=14")
EAVE TRIM 2 3/8" 2 1/2" 1/2" 	EAVE FLASHING 4 1/2" 1" SPECIFIC PITCH
GABLE 4 1/2" 3 1/2" 	RAKE TRIM 6" 4" 3/4"

SUNDANCE CUSTOM STEEL 29 GAUGE TRIM - LENGTH 10'-2" SOME COLORS AVAILABLE IN 26 GA MATERIAL

SQUARE BASE ANGLE (x=1") (x=1 1/2")	WAINSCOT 1 1/2" 1" 1 1/2"
WINDOW DRIP 1 1/2" (x=1") (x=1 1/2") 	"J" CHANNEL 7/8" 7/8" 1/2" 2"
DOOR POST 1 1/2" 	FASCIA SPECIFY 1/2" 1 1/2"
DOOR POST W/ "J" TO SPECIFY 2" 1" 	F&J CHANNEL 7/8" 7/8" 1/2" 7/8" 2 3/4" 3 5/8" 3/4"

SUNDANCE CUSTOM STEEL 29 GAUGE TRIM - LENGTH 10'-2" SOME COLORS AVAILABLE IN 26 GA MATERIAL

OUTSIDE CORNER 3/4" 1" 4 1/4" 	3" OUTSIDE CORNER 1" 3" 3/4"
INSIDE CORNER 3/4" 4 1/4" 4 1/4" 1" 	"C" CHANNEL Specify Width Color Side 1 1/2" 1 1/2"
ENDWALL FLASHING 5 1/2" 4" 	SIDEWALL FLASHING 4" 3" 1" 3/4"
DOOR TRACK COVER 3 7/16" 2 7/16" 2 3/8" 	SNOW GUARD 3 1/4" 2" 1 1/2" 1 1/2" 1/2" 1/2"

PANEL OPTIONS

SUNDANCE CUSTOM STEEL 29 GAUGE TRIM - LENGTH 10'-2" SOME COLORS AVAILABLE IN 26 GA MATERIAL

"L" TRIM INSIDE OUTSIDE COLOR COLOR 	TRANSITIONS Inside Outside 6 1/2"
AG PANEL (26 GA OR 29 GA) 	PBR PANEL (ONLY IN 26 GA) 36" COVERAGE 12" 1 7/16" 3/4" 1" 1 1/4" 3/16"
ACCESSORIES SCREWS WOODGRIP; 1 1/2" & 2" OSB FAT BOYS 1" DRILLERS 1" - (1 1/2" & 2" AVAILABLE IN SOME COLORS) 7/8" STITCH	CLOSURES OUTSIDE - GLUED AND UNGLUED INSIDE - GLUED AND UNGLUED VENTED SKYLIGHT PANEL (AG PANEL PROFILE) PIPE FLASHERS
Custom Panel Panel Coverage: 36" Major Rib Spacing: 9" Rib 3/4" high Typical fastener placement at intermediate purlin. Typical fastener placement at eaves and gable strut. Typical fastener placement at edge.	