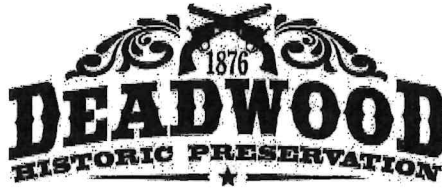


OFFICE OF
**PLANNING, ZONING AND
 HISTORIC PRESERVATION**
 108 Sherman Street
 Telephone (605) 578-2082
 Fax (605) 578-2084



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>674 Main Street Deadwood, SD 57732</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 Diamond Capital, LLC</u>
Address: <u>205 6th Ave SE Suite 300</u>
City: <u>Aberdeen</u> State: <u>SD</u> Zip: <u>57401</u>
Telephone: <u>605-225-1712</u> Fax: _____
E-mail: <u>jlamont@lamontcompanies.com</u>

Architect's Name: <u>NA</u>
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
E-mail: _____

Contractor's Name: <u>Lamont Companies</u>
Address: <u>Same</u>
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____
E-mail: _____

Agent's Name: <u>Jeff Lamont</u>
Address: <u>Same</u>
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 checked="" 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

FOR OFFICE USE ONLY

Case No. _____

ACTIVITY: (CHECK AS APPLICABLE)				
Project Start Date: <u>9-16-24</u>		Project Completion Date (anticipated): <u>5-1-25</u>		
<input checked="" type="checkbox"/> ALTERATION	<input checked="" type="checkbox"/> Front	<input checked="" type="checkbox"/> Side(s)	<input checked="" 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 type="checkbox"/> Re-roofing	<input 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).

Remove and replace existing siding and some painting

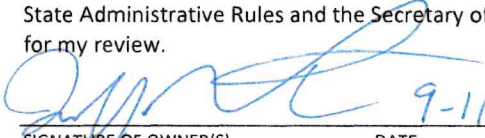
FOR OFFICE USE ONLY
Case No. _____

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.


9-11-24

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 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 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.

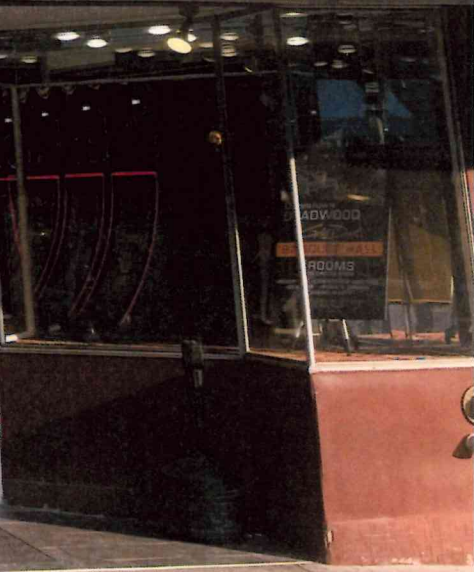
NEW CONSTRUCTION:

- 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.



GoldDust

GoldDust



674



Gold Dust

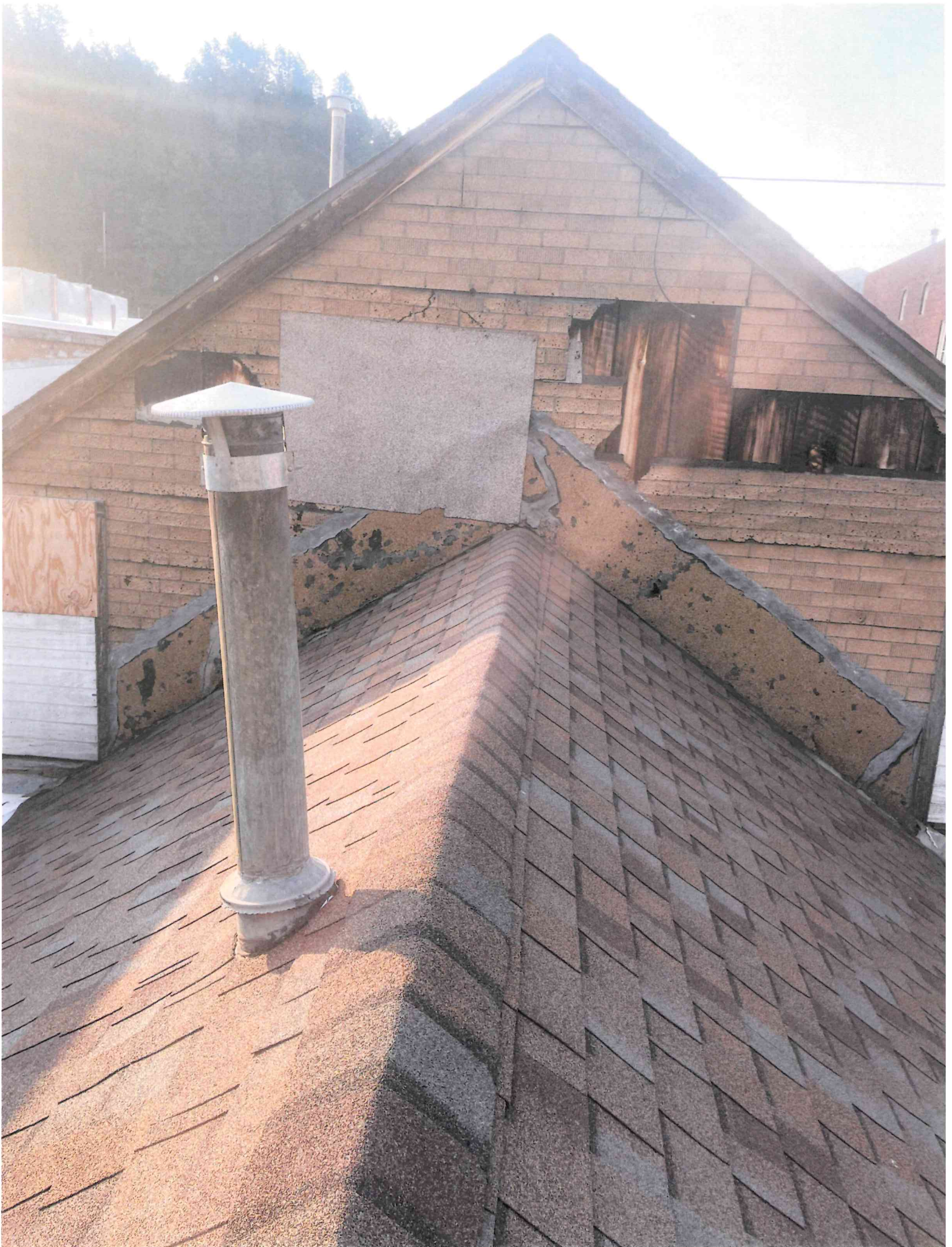
Dust
K

WiFi

PEP

WOODMOR ICE COMPANY







Bonny Anfinson

From: tonys@golddustdeadwood.com
Sent: Wednesday, September 11, 2024 2:36 PM
To: Bonny Anfinson; 'Jeff Lamont'; Kevin Kuchenbecker
Subject: RE: Certificate of Appropriateness

Yes that is the plan to replace the siding with the LP Diamond Kote in the pictures Jeff sent.

Thanks,

Tony Sieber

Gold Dust Casino - General Manager
PO Box 645
Deadwood, SD 57732
605-578-2100 ext 26
www.golddustdeadwood.com

From: Bonny Anfinson [mailto:Bonny@cityofdeadwood.com]
Sent: Wednesday, September 11, 2024 2:16 PM
To: Jeff Lamont; tonys@golddustdeadwood.com; Kevin Kuchenbecker
Subject: RE: Certificate of Appropriateness

Are you replacing siding on top half of the front, all of the back and top of one side?

From: Jeff Lamont <jlamont@lamontcompanies.com>
Sent: Wednesday, September 11, 2024 1:36 PM
To: tonys@golddustdeadwood.com; Kevin Kuchenbecker <kevin@cityofdeadwood.com>
Cc: Bonny Anfinson <Bonny@cityofdeadwood.com>
Subject: RE: Certificate of Appropriateness

Hi Kevin-

Please find the application to replace the siding and some paint at 674 Main Street Deadwood.

We plan to use LP Diamond Kote siding and will get the paint locally thru the grant program.

Pictures attached.

Let us know if you need anything else.

Thanks-

Jeffrey G. Lamont
CEO
Lamont Companies, Inc.
205 6th Avenue SE Suite 300
Aberdeen, SD 57401
Phone 605-225-1712
Fax 605-225-0969
LamontCompanies.com



Bonny Anfinson

From: Jeff Lamont <jlamont@lamontcompanies.com>
Sent: Wednesday, September 11, 2024 2:41 PM
To: tonys@golddustdeadwood.com; Bonny Anfinson; Kevin Kuchenbecker
Subject: RE: Certificate of Appropriateness

Siding replacement is the top front and all of the back.
Thanks

Jeffrey G. Lamont
CEO
Lamont Companies, Inc.
205 6th Avenue SE Suite 300
Aberdeen, SD 57401
Phone 605-225-1712
Fax 605-225-0969
LamontCompanies.com



NOTICE OF CONFIDENTIALITY:

This E-mail message and its attachments (if any) are intended solely for the use of the addressee hereof. In addition, this message and the attachments (if any) may contain information that is confidential, privileged and exempt from disclosure under applicable law. If you are not the intended recipient of this message, you are prohibited from reading, disclosing, reproducing, distributing, disseminating or otherwise using this transmission. Delivery of this message to any person other than the intended recipient is not intended to waive any right or privilege. If you have received this message in error, please promptly notify the sender by reply E-mail and immediately delete this message from your system.

From: tonys@golddustdeadwood.com <tonys@golddustdeadwood.com>
Sent: Wednesday, September 11, 2024 3:36 PM
To: 'Bonny Anfinson' <Bonny@cityofdeadwood.com>; Jeff Lamont <jlamont@lamontcompanies.com>; 'Kevin Kuchenbecker' <kevin@cityofdeadwood.com>
Subject: RE: Certificate of Appropriateness

Yes that is the plan to replace the siding with the LP Diamond Kote in the pictures Jeff sent.

Thanks,

Tony Sieber
Gold Dust Casino - General Manager
PO Box 645
Deadwood, SD 57732
605-578-2100 ext 26
www.golddustdeadwood.com

From: Bonny Anfinson [<mailto:Bonny@cityofdeadwood.com>]
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