

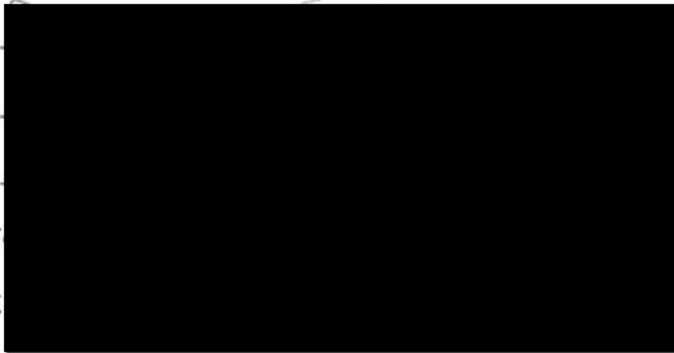
# Historic Facade Easement Program Application

Please read the attached Policy Guidelines, Administrative Procedures and provide the requested information.

1. Address of Property:

37 Sherman St.

2. Applicant's name & mailing address:



3. Owner of property – (if different from applicant):



E-mail \_\_\_\_\_

4. Project Costs:      Total cost of the façade restoration project:      \$ \_\_\_\_\_  
Amount requested for the façade project      \$ \_\_\_\_\_  
(Keep in mind eligible expenses and program maximums)  
Total cost of building rehabilitation project      \$ \_\_\_\_\_  
(Include additional interior work planned)

5. Façade Easement Program Area – Deadwood Local Historic District



6. Required Supporting Documentation

- a. Complete a City of Deadwood Application for Certificate of Appropriateness and attach it to this document.
- Provide detailed description of exterior changes including materials, colors and dimensions
  - Proposed rehabilitation renderings and elevations
  - Current and historic photos of the building
  - Project budget including the entire project and façade project
  - Project timeline
  - General information on project financing or other such information showing feasibility of project
  - Conformance of the project with the Secretary of Interior Standards for Rehabilitation and the Deadwood Downtown Design Guidelines
- b. Acknowledgement of façade easement.

7. Certification

I certify all information contained in this application and all information furnished in support of this application is given for the purpose of obtaining façade easement as true and complete to the best of my knowledge and belief. I acknowledge I have read the policy guidelines for the program included with and for this application and agree to all of the terms and conditions contained in the policy guidelines. I agree any contractors which I hire for this project will hold contractors licenses with the City of Deadwood and will require they also agree to and abide by the terms and conditions of the policy guidelines.

I acknowledge the Deadwood Historic Preservation Commission is merely purchasing the façade and neither the Historic Preservation Commission nor the City of Deadwood is or will be responsible for satisfactory performance of the work or payment for the same beyond the project approval by the Historic Preservation Commission. I acknowledge I am solely responsible for selecting any contractors hired in connection with the project and in requiring satisfactory performance by such contractor. I agree to indemnify and hold harmless the Deadwood Historic Preservation Commission and the City of Deadwood against losses, costs, damages, expenses and liabilities of any nature directly or indirectly resulting from or arising out of or relating to the Deadwood Historic Preservation Commission's acceptance, consideration, approval, or disapproval of this application and the issuance or non-issuance of a façade easement.

Applicant's signature: \_\_\_\_\_

Date submitted: \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner's signature: \_\_\_\_\_

Date submitted: 6/20/25

Please return the completed application along with the Certificate of Appropriateness to:

City of Deadwood  
Planning, Zoning & Historic Preservation  
108 Sherman Street  
Deadwood, SD 57732  
605-578-2082