

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



FOR OFFICE USE ONLY	
Case No.	
☒ Project Approval	
☐ Certificate of Appropriateness	
Date Received	
Date of Hearing	9/23/26

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.

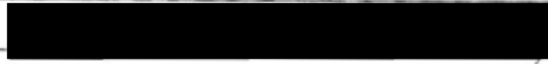
This application must be typed or printed in ink and submitted to:

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:



Deadwood, SD

Historic Name of Property (if known):

APPLICANT INFORMATION

Applicant is: ☒ owner ☐ contractor ☐ architect ☐ consultant ☐ other

Owner's

Address:

City:

Deadwood State SD Zip 57732

Telephone:

E-mail:

Architect's Name:

Address:

City:

State:

Zip:

Telephone:

Fax:

E-mail:

Contractor's

Address:

City:

Rapid City State SD Zip 57702

Telephone:

E-mail:

Agent's Name:

Address:

City:

State:

Zip:

Telephone:

Fax:

E-mail:

TYPE OF IMPROVEMENT

☐ Alteration (change to exterior)

☐ New Construction

☐ General Maintenance

☐ Other

☐ New Building

☐ Re-Roofing

☒ Siding

☐ Awning

☐ Addition

☐ Wood Repair

☒ Windows

☐ Sign

☐ Accessory Structure

☐ Exterior Painting

☐ Porch/Deck

☐ Fencing

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ACTIVITY: (CHECK AS APPLICABLE)	
Project Start Date: <u>2026</u>	Project Completion Date (anticipated): <u>2026</u>
☐ ALTERATION	☐ Front ☐ Side(s) ☐ Rear
☐ ADDITION	☐ Front ☐ Side(s) ☐ Rear
☐ NEW CONSTRUCTION	☐ Residential ☐ Other _____
☐ ROOF	☐ New ☐ Re-roofing ☐ Material ☐ Front ☐ Side(s) ☐ Rear ☐ Alteration to roof
☐ GARAGE	☐ New ☐ Rehabilitation ☐ Front ☐ Side(s) ☐ Rear
☐ FENCE/GATE	☐ New ☐ Replacement ☐ Front ☐ Side(s) ☐ Rear Material _____ Style/type _____ Dimensions _____
☒ WINDOWS	☐ STORM WINDOWS ☐ DOORS ☐ STORM DOORS ☐ Restoration ☒ Replacement ☐ New ☐ Front ☐ Side(s) ☐ Rear Material <u>Wood</u> Style/type <u>Double Hung</u>
☐ PORCH/DECK	☐ Restoration ☐ Replacement ☐ New ☐ Front ☐ Side(s) ☐ Rear Note: Please provide detailed plans/drawings
☐ SIGN/AWNING	☐ New ☐ Restoration ☐ Replacement Material _____ Style/type _____ Dimensions _____
☐ 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).

Replace Siding w/ Smooth White LP Siding
6" Reveal Tapped so it will only be a
5" Reveal - Replace Siding on Privacy
fence as well that matches house.
Replace Living Room Picture Window w/ 2
double hung wood windows. Replace lower level
crank out window w/ double hung wood
window + replace small dining room window
w/ same wood style window that is currently there.

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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.

Leslie Hunterbach 9-13-20
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.