OFFICE OF PLANNING, ZONING AND HISTORIC PRESERVATION

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



FOR OFFICE USE ONLY Case No 230144 ☐ Project Approval Certificate of Appropriateness Date Received 104623
Date of Hearing 11823

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 REGARDIN	G THIS FORM, CALL 605-578-2082
PROPERT	TY INFORMATION
Property Address: 715 Main St.	
Historic Name of Property (if known): Masonic Lodge a	and Temple
APPLICANT	INFORMATION
Applicant is: Owner Contractor Carchitect Co	onsultant other
Owner's Name. Masonic Lodge	Architect's Name
Address: 715 Main St	Address:
City: Deadwood State SD Zip: 57732	City: State: Zip
Telephone: Fax:	Telephone Fax
E-mail: dokruth2001@yahoo.com	E-mail:
Contractor's Name: High Plains Remodel	Agent's Name
Address: 103 hidden Gulch	Address
City: Central City State: SD Zip: 57754	CityStateZip
Telephone: 307-871-7571 Fax:	Telephone:Fax:
E-mail: highplainsrr@gmail.com	E-mail:
TYPE OF IN	IPROVEMENT
✓ Alteration (change to exterior)	
New Construction New Building	Addition Accessory Structure
General Maintenance Re Roofing	■ Wood Repair ■ Exterior Painting
Siding	Windows Porch/Deck
OtherAwning	Sign Fencing

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ACTIVITY: (CHECK AS APPLICABLE)		
Project Start Date: As app	proved	Project Completion Date (anticipated):
ALTERATION	Front	Side(s) Rear
ADDITION	Front	Side(s) Rear
NEW CONSTRUCTION	Resident	alOther
ROOF	New Front	Re-roofing Material Side(s) Rear Alteration to roof
☐GARAGE	New Front	Rehabilitation Side(s) Rear
FENCE/GATE		Replacement Side(s) Rear
Material		Style/type Dimensions
	Restorati	DOORS STORM DOORS ION Replacement New Side(s) Rear
Material		Style/type
Note: Please provide	Front detailed plans.	/drawings
		Restoration Replacement
Material Style/type Dimensions OTHER Describe in detail below or use attachments		
DESCRIPTION OF ACTIVITY		
applicable. Descriptive ma- commissioners and staff e- work along with general di Failure to supply adequate below (add pages as neces	terials such as valuate the pro rawings and/or documentations sary)	attachments if necessary including type of materials to be used) and submit as photos and drawings are necessary to illustrate the work and to help the aposed changes. Information should be supplied for each element of the proposed photographs as appropriate in could result in delays in processing and denial of the request. Describe in detail loor and replace with proposed.
Temove examing nor	r endance d	oor and replace will proposed.

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.

Lunderstand 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.

Lunderstand 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.

		THE TENTE CONTINUE		
		m/ Mars	10262	
SIGNATURE OF OWNER(S)	DATE	SIGNATURE OF AGENT(S)	DATE	
SIGNATURE OF OWNER(S)	DATE	SIGNATURE OF AGENT(S)	DATE	
SIGNATURE OF OWNER(5)	DATE	SIGNATURE OF AGENT(5)	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.

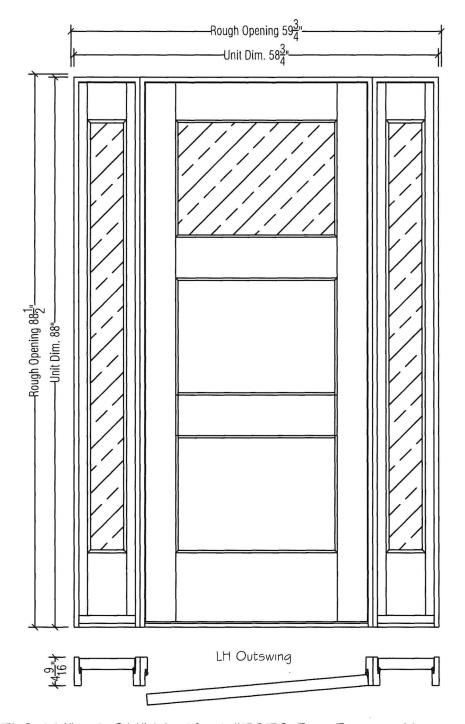
The City of Deadwood Historic Preservation Office has numerous resources available for your assistance upon request.



Bayer Built Woodworks, Inc.

24614 US HWY 71 North Belgrade, MN 56312 Residential/Commercial Department Toll Free: (800) 644-9972 Fax: (320) 254-3601

Job Name DEADWOOD MASONIC LODGE		Quote/Estimate # 137003
Yard Name	Drawn By	Date
KNECHT-SPEARFISH	SLEE	101823



3'-0" x 7'-2 1/4" x 1 '3/4" Modified #7273 Fir - Exterior Unit 0'-9 1/8" x 7'-2 1/4" x 1 3/4" Modified #7701 Fir Sash - Paired Sidelites 4 9/16" Fir Outswing Jamb - ADA Sill, No BM

	**CAD Sign Off Required **
Please Sign Here X	Date:
This Drawing Must	Be Signed and Returned to Initiate Processing Of This Order

