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



FOR OFFICE USE, ONLY Case No. 200144 Project Approval

Certificate of Appropriateness Date Received 812622
Date of Hearing 9114122

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

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PROPERTY INFORMATION						
Property Address: 100 Child ST						
Historic Name of Property (if known):						
APPLICANT INFORMATION						
Applicant is: Owner Contractor architect consultant other						
Owner's Name: Todd Voss Address: 876 Regency CT City: Brookings State: 50 zip: 57000 Telephone: 605 600 7900 Telephone: 605 600 7900 E-mail: 16000 Fax: E-mail: 16000 Fax: E-mail: 16000 Fax: E-mail: 16000 Fax: Todd Voss Architect's Name: Lance Engineering Address: 19751 St Onge Rd City: St Onge State: 50 zip: 57759 Telephone: 605 642 3680 E-mail: 16000 Fax: E-mail: 16000 Fax:						
Contractor's Name: Dash Woodwork by J Address: 6815 Ridge view prive Construct Address:						
TYPE OF IMPROVEMENT						
☑Alteration (change to exterior) ☐ New Construction ☐ New Building ☐ Addition ☐ Accessory Structure ☐ General Maintenance ☐ Re-Roofing ☐ Wood Repair ☐ Exterior Painting ☐ Siding ☐ Windows ☐ Porch/Deck ☐ Other ☐ Awning ☐ Sign ☐ Fencing						

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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 □ STOR	Restoration Replacement New Front Side(s) Rear					
Material	Style/type					
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 d	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). Represented the supports and in part of deck previously removed replace decking and install						
Materials	- All wood product will be AC2 Cedarton					
	Treated. RAiling will be Fortress brand FE;					
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ACTIVITY: (CHECK AS APPLICABLE)

Project Completion Date (anticipated):

Project Start Date:

	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.

		Dave Kogne	8-26-22
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.

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Repair and replacing siding as needed with same type of material and design



