NOTICE OF A MEETING FOR

CITY OF CHICKASHA
HISTORIC PRESERVATION COMMITTEE

In compliance with Title 25, Oklahoma Statutes, Section 301-314, the Oklahoma Open Meeting Act, including the posting of notices and agenda, be advised that the **City of Chickasha Historic Preservation Committee** of the City of Chickasha, Oklahoma, meeting on **Wednesday, November 8, 2023, at 3:00 PM.**

Said meeting will be held at City Hall, 2nd Floor City Council Chambers, 117 N. 4th Street, Chickasha, Oklahoma.

The City of Chickasha encourages participation from all its citizens. If special accommodations are needed, please notify the City Clerk at least 48 hours prior to the scheduled meeting. The City may waive the 48-hour rule if the necessary accommodations can be easily made.

AGENDA

1 Call to Order/Roll Call

2 Meeting Items

a. Discussion, consideration and possible action to approve the minutes of the October 23, 2023 Meeting

b. Discussion, consideration and possible action to approve the Facade design for the Grady County Health Department at 205 W Chickasha Ave

c. Discussion, consideration and possible action to approve the sign permit application for 617 Choctaw for Applicant Tim Schmidt for West Valley Buildings.

d. Discussion, consideration and possible action to approve the Downtown Facade Grant Application for 501 Chickasha Ave for Applicant Thome Cook Insurance Agency.

3 Motion to Adjourn.

_____
Rachel Bernish, Director of Community Development

Posted this ____ day of _____, 20____ at _____ am/pm at City Hall.

City of
CHICKASHA

Meeting Type: Historical Preservation 11.8.23

Meeting Date: 11/8/2023

Department: Community Development **Agenda Item No. 2.a.**

AGENDA ITEM: Discussion, consideration and possible action to approve the minutes of the October 23, 2023 Meeting

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director: NAME, TITLE	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: November 8, 2023	(From)		

V. ATTACHMENTS:

1. HISTORIC PRESERVATION MEETING MINUTES 10 -23-2023 FINAL

NOTICE OF MEETING FOR
CITY OF CHICKASHA
HISTORIC PRESERVATION COMMITTEE

HISTORIC PRESERVATION MEETING

September 23, 2023

1. **Call meeting to order: 4:00 Pm**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Present: Feaver, Vernon. Hunter, and Sanders

Absent:

Staff Present: Rachel Bernish, Community Development Director, Caleb Lester, Darren Martin Chief Building Inspector

Citizens: Chet Hitt, Luke Lewis, and Carrie Chavers

2. **Meeting Items:**

a. **Discussion, Consideration and Possible action to approve the minutes from the August 22, 2023 meeting.**

***Motion by: Sanders and second by Hunter to approve minutes from the August 22, 2023, meeting.**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

b. **Discussion, Consideration and Possible action to approve the sign permit application for 102 E. Chickasha Ave for the Chickasha Visitor Center .**

***Motion by: Sanders and second by Vernon to approve**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

c. **Discussion, Consideration and Possible action to approve the sign permit application for 205 Kansas for Applicant Brian Gerdes.**

***Motion by: Vernon and second by Sanders to approve**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

d. **Discussion, Consideration and Possible action to approve the sign permit application for SAVOY 1902 for applicant Oh Hitt Corp.**

***Motion by: Vernon and second by Hunter to approve**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

e. **Discussion, Consideration and Possible action to approve the Mural design for the Mill Building.**

***Motion by: Vernon and second by Sanders to approve**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

3. **Motion to adjourn meeting: 4:17 PM**

***Motion: Vernon and seconded by Hunter to approve**

Roll Call: John Feaver, Glen Vernon, Bob Hunter, Joyce Sanders

Ayes: Feaver, Vernon. Hunter, and Sanders

Nays:

Abstain:

City of
CHICKASHA

Meeting Type: Historical Preservation 11.8.23

Meeting Date: 11/8/2023

Department: Community Development **Agenda Item No. 2.b.**

AGENDA ITEM: Discussion, consideration and possible action to approve the Facade design for the Grady County Health Department at 205 W Chickasha Ave

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director: NAME, TITLE	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: November 8, 2023	(From)		

V. ATTACHMENTS:

1. 1_1 - Photo


GRADY COUNTY HEALTH DEPA NT

City of
CHICKASHA

Meeting Type: Historical Preservation 11.8.23

Meeting Date: 11/8/2023

Department: Community Development **Agenda Item No. 2.c.**

AGENDA ITEM: Discussion, consideration and possible action to approve the sign permit application for 617 Choctaw for Applicant Tim Schmidt for West Valley Buildings.

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

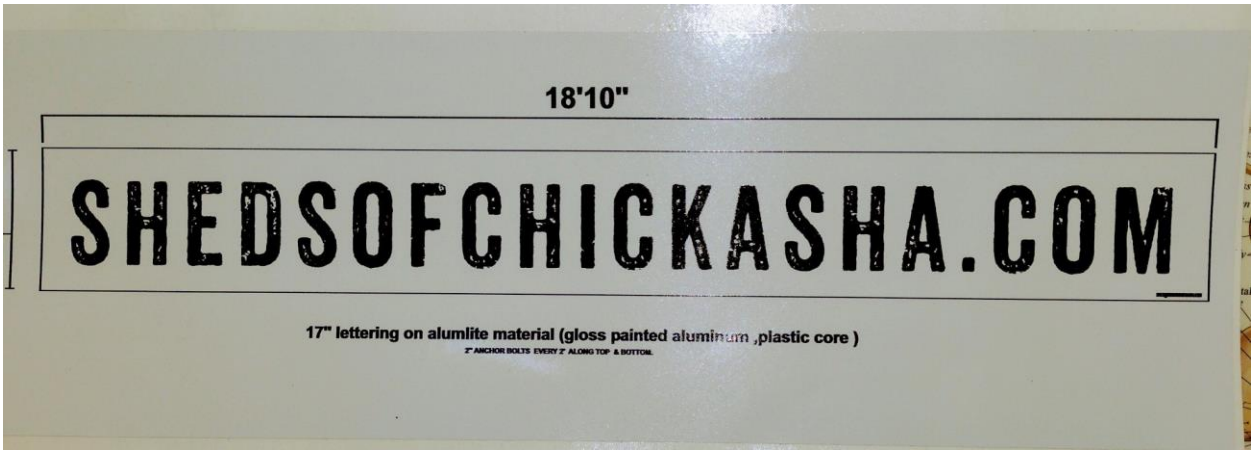
III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director: NAME, TITLE	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: November 8, 2023	(From)		

V. ATTACHMENTS:

1. SHED


18'10"
SHEDSOFCHICKASHA.COM
17" lettering on alumlite material (gloss painted aluminum ,plastic core)
2" ANCHOR BOLTS EVERY 2' ALONG TOP & BOTTOM.

City of
CHICKASHA

Meeting Type: Historical Preservation 11.8.23

Meeting Date: 11/8/2023

Department: Community Development **Agenda Item No. 2.d.**

AGENDA ITEM: Discussion, consideration and possible action to approve the Downtown Facade Grant Application for 501 Chickasha Ave for Applicant Thome Cook Insurance Agency.

I. BACKGROUND/DESCRIPTION:

II. RECOMMENDED ACTION:

III. FISCAL INFORMATION -

IV. FUND INFORMATION:

Dept. Director: NAME, TITLE	Fund	Account	Amount
	(To)		
	FUND	ACCOUNT	AMOUNT
Meeting Date: November 8, 2023	(From)		

V. ATTACHMENTS:

1. Cook Building
2. Cook2
3. Cook Certificate
4. 20231031102121683


BRISCOE
FARMERS
INSURANCE
THOME COOK AGENCY
FARMERS
INSURANCE


BRISCOE
FARMERS
INSURANCE
THOME COOK AGENCY
FARMERS

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY): 10/31/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

PRODUCER
Thome Cook(0808329)
501 W Chickasha Ave
Chickasha OK 73018-2411

CONTACT NAME:
PHONE (A/C, NO, EXT): 405-224-3652
FAX (A/C, NO):
E-MAIL ADDRESS: tcook@farmersagent.com
PRODUCER CUSTOMER ID:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Truck Insurance Exchange	21709
INSURER B:	Farmers Insurance Exchange	21652
INSURER C:	Mid Century Insurance Company	21687
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
COOK,
PO BOX 429
CHICKASHA OK 73023

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

LOCATION OF PREMISES/DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
501 W CHICKASHA AVE, CHICKASHA, OK, 73018

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
A	☐ PROPERTY CAUSES OF LOSS / DEDUCTIBLES ☐ BASIC — BUILDING ☐ BROAD — 5,000 ☒ SPECIAL — CONTENTS 5,000 ☐ EARTHQUAKE ☐ WIND ☐ FLOOD	600980173	09/21/2023	09/21/2024	☒ BUILDING ☒ PERSONAL PROPERTY ☐ BUSINESS INCOME ☐ EXTRA EXPENSE ☐ RENTAL VALUE ☐ BLANKET BUILDING ☐ BLANKET PERS PROP ☐ BLANKET BLDG & PP	$ 1,221,800 $ 181,900 $ $ $ $ $ $
	☐ INLAND MARINE CAUSES OF LOSS ☐ NAMED PERILS	TYPE OF POLICY POLICY NUMBER				$ $ $ $
	☐ CRIME TYPE OF POLICY					$ $ $
	☐ BOILER & MACHINERY/ EQUIPMENT BREAKDOWN					$ $
						$ $

SPECIAL CONDITIONS/OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER
FARMERS INSURANCE GROUP FCU
PO BOX 36911
LOS ANGELES CA 90036

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE

City of Chickasha

Facade Grant Application

Please fill out this application completely and legibly.

Property Information	**Business Name:** THOME COOK INSURANCE AGENCY	**Telephone:** 405-224-3652
	Physical Address: 501 CHICKASHA AVENUE	**Email:** THOCOOK@AOL.COM

Applicant Information	**Full Name:** THOME COOK	**Telephone:** 405-574-2383
	Mailing Address: P.O. BOX 429 CHICKASHA, OK 73023	**Email:** THOCOOK@AOL.COM

Owner Information (If other than applicant)	**Full Name:**	**Telephone:**
	Mailing Address:	**Email:**

BUDGET WORKSHEET

Please use the table below to outline each proposed improvement and the associated cost.

IMPROVEMENT	DETAILED DESCRIPTION	AMOUNT
PAINTING FACADE	SCRAPE AND PAINT EXTERIOR WOODEN FACADE	974.91
		TOTAL 974.91

PLEASE ATTACH ADDITIONAL BUDGET WORKSHEETS IF NECESSARY

Proposed Facade Improvements (please specify)

SCRAPE, CAULK AND PAINT WOODEN FACADE

Scope of Proposed Project (include a summary of the building's current condition, areas to be improved and how, as well as any proposed materials or colors)

PEELING PAINT

COLOR WILL BE A DARK BLUE

Required Documentation (these items **must** be submitted with the **signed** Application)

- □ Certificate of Appropriateness from the Historic Preservation Commission
- □ Written structural engineer's report (completed within the last 6 months)
- □ Waived by Chief Building Official _____ (Initial)
- □ Proof of Property Insurance
- □ At least two different 8 X 10 color photographs of existing building facade
- □ Photos, plans, or sketches of proposed improvements
- □ Quotes, fee proposal, and any other back up that supports the proposed
- □ Owner's permission, if necessary

By signing below, I acknowledge that I have read the Facade Grant Guidelines and I agree to comply with the guidelines and standards, Further, I assert that I understand that this is a voluntary program, under which the Historic Preservation Commission has the right to approve or deny any project or proposal or portions thereof.

Applicant Signature: _____ Date: _____

Printed Name: Thome Cook

Applicant Telephone Number: 405-574-2383

Owner Signature: _____

Printed Name: Thome Cook

Owner Telephone Number: 405-574-2383

State of Oklahoma)
) ss.
County of Grady)

On this 31 day of October, 2023, before me, a Notary Public in and for Grady County, State of Oklahoma, personally appeared Thome Cook, the "Owner", known to me (or proved on the basis of satisfactory evidence) to be the person whose name is subscribed to within the instrument and acknowledged that he/she voluntarily executed the same.

In Witness Whereof, I have hereunto subscribed my name and affixed my official seal on the day and year last above written.

(SEAL)

KELLY DEATHERAGE NOTARY # 22007221 EXP. 05/24/26 PUBLIC STATE OF OKLAHOMA

Kelly Deatherage
Notary Public

KELLY DEATHERAGE NOTARY # 22007221 EXP. 05/24/26 PUBLIC STATE OF OKLAHOMA

Submit the completed Application, all required documentation attached in person or via US Mail to the office of Community Development located at 117 N. 4th Street Chickasha, Oklahoma.

Date Submitted: _____ **Received by:** _____

Application Complete: o **Yes**□ **No** **Comments:** _____

Additional Comments: _____

Completed Application Accepted By: _____ **Date:**

Facade Grant#: _____ **Amount Requested:**

Commission Action

□ Recommend Approval

□ Recommend Denial

Application Review Date: _____

Grant Amount Recommended:

The application has been approved by the Chickasha Industrial Authority for a Facade Grant in the amount of_____. This amount is to be reimbursed upon project completion, after copies of all the applicant's elated statements or invoices, with proof of payment have been submitted.

Approved on_____, by_____, Trust Manager

Pre-inspection Date: _____Pictures Taken

Inspection Date: _____Pictures Taken

Final Inspection Date: _____Pictures

Inspection Notes: _____

Applicant Request for Reimbursement Date: _____ _____

Applicant Signature

Date Approved for Grant Reimbursement on_____

Completed Application Sent to Purchasing for Reimbursement _____

Staff Signature

OKies Finest Remodeling Co

Landon Chambers
(580) 768-8646

Proposal

PROPOSAL NO.	DATE Oct 26 2023
BID NO.	ARCHITECT

TO Thome Cook	PHONE NO. (580) 768-8646
ADDRESS 501 Chickasha ave 73018	WORK TO BE PERFORMED AT: 501 Chickasha Ave 73018

DATE OF PLANS

We hereby propose to furnish the materials and perform the labor necessary for the completion of

Paint will be covered by Customer

Area below for additional description and/or drawings:

Scrape old Paint thats Flaking

Caulk and Reseal Siding

Paint Siding (Facia & Sofit)

Labor $500.00

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of $500.00

_____ Dollars ($_____) with payments to be made as follows.

Due when Completed

ACCEPTANCE OF PROPOSAL The above prices, specifications, and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outlined above.

Signature Landon Chambers

Date Oct, 26, 2023

Signature X

adams NC3818-50

11-12

SHERWIN-WILLIAMS.

10/25/23 2:04 PM

CUSTOMER ORDER

CUST#: 2818-3362-4
JOB: 1 THOME COOK INS AGENCY INC.
BILL TO: THOME COOK INS AGENCY INC.

PO BOX 429
CHICKASHA OK 73023 0429

STORE: 707356 SHERWIN-WILLIAMS
1124 S 4TH ST
CHICKASHA OK 73018 4634
PHONE: (405)224-6543
FAX: (405)224-6529

TYPE: STORE
CUST PO#:
CONTROL#: 0139471
ORDER#: OE0139471Q707356
ENTRY DATE: 10/25/23
REQUIRED DATE: 10/25/23
CANCEL DATE:
EMPLOYEE: ENGLEBRETSON, CODY W
STATUS: IN PROCESS
CONTACT:
PHONE:
DELIVERY: NO
INSTALL: NO
DEMONSTRATION: NO
CUST ORDER JOB:

SHIP-TO:

SALES #	SIZE	PRODUCT / MFG NBR	DESCRIPTION	QTY ORDERED	PRICE	EXTENDED PRICE	STATUS	S-W PURCHASE ORDER	SALES TERM/TRAN
6403-92387	5 GAL	A89T00154	SPR EXT SA ULTRA	10.00	43.57	435.70	COMMITTED		

Color: SW6811 HONORABLE BLUE
Location: 179-C7

CE*Color Cast	OZ	32	64	128
W1 White	4	-	1	1
B1 Black	-	18	1	1
L1 Blue	32	9	1	1
R3 Magenta	12	34	1	1

Sher-Color Formula

SUB TOTAL	435.70
TAX	39.21
ORDER TOTAL	474.91

THIS IS NOT AN INVOICE