

OFFICIAL MINUTES
SUMMERSET PLANNING AND ZONING COMMISSION
SPECIAL MEETING
7055 LEISURE LANE
JUNE 22, 2021 @ 6:00 P.M.

The meeting was called to order by Commissioner Oldfield at 6:00 p.m.

ROLL CALL: Brody Oldfield, Dustin Hirsch, John Hough and Casey Kenrick. Also, present was the City Administrator Lisa Schieffer.

CALL FOR CHANGES: **Motion** by Hough, second by Hirsch to approve the Agenda of the meeting for June 22, 2021. Motion carried.

CONSENT CALENDAR: **Motion** by Kenrick, second by Hough to approve the minutes of the regular meeting of June 10, 2021. Motion carried.

FINAL REVIEW – REQUEST TO VACATE PATRIOT DRIVE RIGHT OF WAY

Located NE1/4 of the SW1/4 Section 25, T3N, R6E

Chairman Oldfield asked if there was public comment. Longbranch Engineering spoke to the same.

Motion by Hirsch, second by Kenrick to approve the vacation of Patriot Drive right-of-way, contingent on Longbranch Engineering providing correspondence from Black Hawk Water to correct HDR's comments.

FINAL PLAT REVIEW TO VACATE PATRIOT DRIVE RIGHT OF WAY

The existing Portion of Tract 3 of the S ½ of Sec. 25, and the unplatted portion of Lot B of the E ½ of the NW ¼, and the Patriot Drive ROW, Sec. 25, T3N, R6E

Motion by Kenrick, second by Hough to approve Final Plat review contingent on HDR's comments being corrected.

ADJOURNMENT

Motion by Hirsch, second by Kenrick to adjourn the meeting at 6:17 p.m. Motion carried.

Candace Sealey, Finance Officer

Brody Oldfield, Chairman

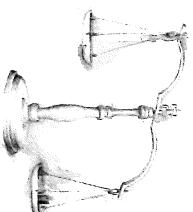
Published once July 1st at a cost of \$41.70.

Oath of Office

State of South Dakota)

) ss.

County of Meade)



I, Michael Martin, having been appointed to the Planning and Zoning Board for the remainder of the vacant term, within and for said City of Summerset, do solemnly swear that I will support the Constitution of the United States and the Constitution of the State of South Dakota, and that I will faithfully and impartially, to the best of my knowledge and ability, perform all duties of my said office as provided by law.

Michael Martin

Subscribed and sworn to before me this 13th day of July, 2021.

Brody Oldfield

NOTICE OF PUBLIC HEARING

NOTICE OF HEARING APPLICATION FOR VARIANCE BEFORE THE CITY OF SUMMERSET BOARD OF ADJUSTMENTS

Notice is hereby given that the following petitioner has applied to the City of Summerset Board of Adjustments under the provisions of the City of Summerset Zoning Ordinance #2 as follows:

Joe Allen, applicant for a Variance for Lot 4 of Red Arrow Subdivision located in “Government” Lot 4 of Section 31, T3N, R7E, BHM, Meade County, SD.

Applicant has requested a variance: to allow a shared gravel drive (Access & Utility Easement) in lieu of a dedicated and developed Lane/Place right-of-way for proposed Lots 4A, 4B and 4C of Red Arrow Subdivision. This request would waive the requirement for asphalt pavement, curb/gutter and sidewalk.

Notice is further given that said application will be heard and considered by the City of Summerset Board of Adjustments at Summerset City Hall, 7055 Leisure Lane, Summerset, SD 57718 at 6:00 p.m. on the July 13, 2021. At that time, any person, persons, or their attorney who are interested in the approval or rejection of said application may appear and be heard at said scheduled public hearing.

Dated this June 17, 2021.

Candace Sealey
Finance Officer

Published once June 29, 2021, at an approximate cost of \$30.27

RE: Public Hearing Notice

Sheri Sponder <Sheri.Sponder@lee.net>

on behalf of

RCY Legals <legals@rapidcityjournal.com>

Thu 6/17/2021 8:32 PM

To: Lisa Schieffer <lschieffer@CityofSummerset.onmicrosoft.com>

Scheduled for publication June 29, at a cost of \$30.27

Sheri Sponder

Obituary and Legal Advertising Consultant

605-394-8336 (legals)

605-394-8420 (obituaries)



From: Lisa Schieffer [mailto:lschieffer@CityofSummerset.onmicrosoft.com]

Sent: Thursday, June 17, 2021 11:42 AM

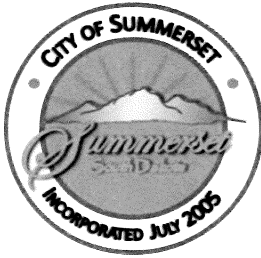
To: RCY Legals

Subject: Fw: Public Hearing Notice

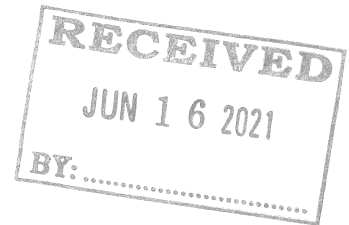
Please publish June 29th. Thank you.

Lisa Schieffer

Summerset City Administrator



City of
SUMMERSET
A GREAT PLACE TO CALL HOME



VARIANCE APPLICATION

1. APPLICANT: JOE ALLEN DAYTIME PHONE: 605-391-2345
MAILING ADDRESS: 6900 ANDERSON RD., BLACK HAWK, SD 57118
AUTHORIZED AGENT: FISK LAND SURVEYING & CONSULTING ENG. DAYTIME PHONE: 605-348-1538
MAILING ADDRESS: PO BOX 8154, RAPID CITY, SD 57709
OWNER: JOE ALLEN DAYTIME PHONE: 605-391-2345
MAILING ADDRESS: 6900 ANDERSON RD., BLACK HAWK, SD 57118
2. VARIANCE(S) REQUESTED: TO ALLOW A SHARED GRAVEL DRIVE (ACCESS & UTILITY EASEMENT) IN LIEU OF A LANE/PLACE ROW
EXISTING LEGAL DESCRIPTION: LOT 4 OF RED ARROW SUBDIVISION LOCATED IN "GOVERNMENT" LOT 4 OF SECTION 31, T3N, RTE. BHM, MEADE COUNTY, SD (PROPOSED LOTS 4A, 4B & 4C)
SPECIFIC STANDARD BEING APPEALED AND REMEDY: ALLOW A SHARED GRAVEL DRIVE (ACCESS & UTILITY EASEMENT) IN LIEU OF THE MUNICIPAL LANE/PLACE STREET SECTION (ASPHALT, CURB/GUTTER & SIDEWALK). NONE OF THE ADJOINING DEVELOPMENT MEETS SUMMERSET STANDARDS
PHYSICAL HARDSHIP: THIS WILL NOT BE PART OF THE SUMMERSET STREET SYSTEM. SHARED ACCESS IS SIMILAR TO ADJOINING LOTS 5A-5C.
PROPOSED LAND USE: RESIDENTIAL - 2 ADDITIONAL LOTS
SUBDIVISION REGULATION: FIGURE Z-1

SITE ZONING: N/A OUTSIDE CITY LIMITS - RESIDENTIAL USE

SURROUNDING ZONING: NORTH N/A SOUTH N/A EAST N/A WEST N/A

PHYSICAL CHARACTERISTICS: ROLLING MEADOW UTILITIES: COMMUNITY WATER PRIVATE WASTE

3. THE OWNER, APPLICANT, OR AUTHORIZED AGENT, ACKNOWLEDGES: That he / she has read and received a copy of the Variance Procedures and this application form concerning the filing and hearing of this matter; that he / she authorizes City of Summerset staff and designees to enter onto and inspect the above described property; and, that he / she has been advised of the fee requirements and they have been paid.

[Signature]
APPLICANT / AGENT SIGNATURE

6-15-21
DATE

[Signature]
OWNER SIGNATURE

6-15-2021
DATE

4. DATE / TIME OF: 600 pm
PLANNING COMMISSION HEARING: 7/13/2021 LOCATION: Summerset City Hall
CITY COMMISSION MEETING: 7/15/2021 LOCATION: Summerset City Hall

The Fee for a Variance is \$300.00

1. Discuss the proposed variance with City Planning staff member(s) upon submission.
2. Fill out the Variance Application Form provided by the City of Summerset. The application must state the requested variance and the physical hardship which precludes the applicant from meeting the requirements of the zoning ordinance. The staff member will assign the date of the Planning Commission and City Commissioners meetings for the Variance request.
3. Staff reviews the request and prepares a report. A copy of the report and agenda will be provided to Planning and Zoning for hearing at which your request will be considered. It is recommended that the petitioner or a representative attend the Planning Commission meeting to answer any questions. Planning and Zoning makes their recommendation to the City of Summerset Commissioners. The Board of Commissioner's action is final, although their decisions may be appealed through the Circuit Court.

Planning Office Use Only

| | |
|-----------------------------------|---|
| Planning and Zoning Meeting Date: | <u>July 13th, 2021 @ 6:00 pm</u> |
| Planning Chair Signature: | _____ |
| Commission Meeting Date: | <u>July 15th, 2021 @ 6:00 pm</u> |
| Mayors Signature: | _____ |
| Date Paid _____ | Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card |



FISK LAND SURVEYING & CONSULTING ENGINEERS, INC.

1022 W. Main Street • P.O. Box 8154 • Rapid City, SD 57709

Phone (605) 348-1538 • E-mail: info@fisklandsurveying.com

www.fisklandsurveying.com

June 15, 2021

City of Summerset
7055 Leisure Lane
Summerset, SD 57718

RE: Variance Application
Joe Allen – 6900 Anderson Road
Proposed Lots 4A, 4B and 4C of Red Arrow Subdivision, Meade County, SD

To Whom It May Concern:

On behalf of Joe Allen of 6900 Anderson Road, Black Hawk, SD 57718, we are requesting a Variance to allow a shared gravel drive (Access & Utility Easement) in lieu of a dedicated and developed Lane/Place right-of-way for proposed Lots 4A, 4B and 4C of Red Arrow Subdivision. This request would waive the requirement for asphalt pavement, curb/gutter and sidewalk.

The proposed lots would share the existing approach on Anderson Road and a common driveway would extend north along the east side of the property line to serve the 2 future residences.

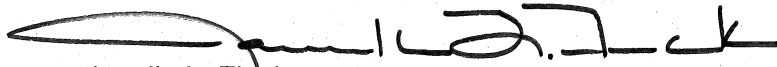
The Allen property is located south of Summerset on Anderson Road outside of the municipal limits, but within the 3-mile platting jurisdiction. None of the adjoining properties in this area are part of the Summerset Street system or developed to Summerset road standards (Figure 2-1). The proposal for a shared drive is similar to the division of Lot 5 directly to the east of Lot 4 (see enclosed aerial).

The requested Variance meets the 4 established criteria:

1. The Variance will not be contrary to public interest since access will not be part of the Summerset Street system and will be developed similarly to the adjoining properties.
2. The literal enforcement of the title would create an unnecessary and unreasonable burden on the landowner – requiring development of a City street section outside of the municipal limits and in excess of other development in this area.
3. The spirit of the ordinance is observed by allowing development and access that is similar to the adjoining uses.
4. Substantial justice is done by allowing the Allen's to utilize their property in the same or similar manner to the adjoining uses.

Thank you for your time and assistance and please let me know if there is anything else that we can or should provide for this request.

Sincerely,
FISK LAND SURVEYING & CONSULTING ENGINEERS, INC.

A handwritten signature in black ink, appearing to read "Janelle L. Finck", written over a horizontal line.

Janelle L. Finck
President

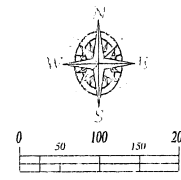
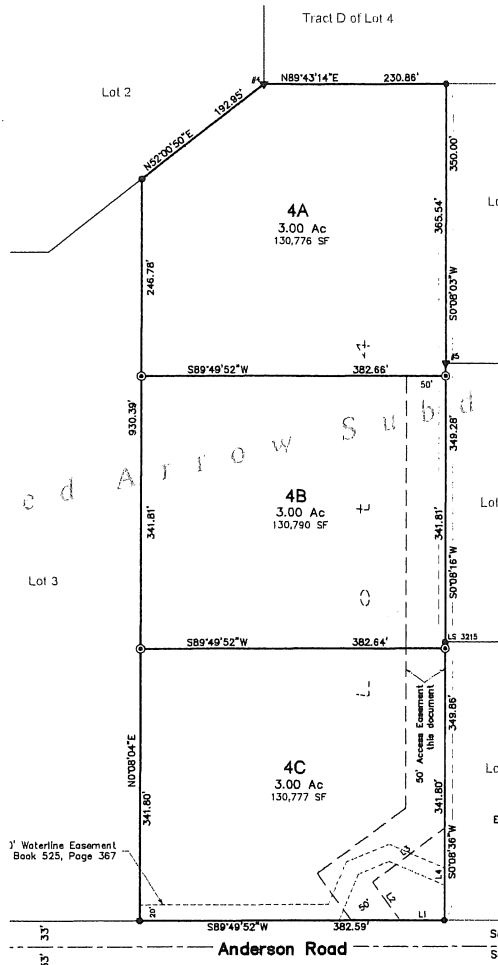
jlf
encl

Plat of Lots 4A, 4B and 4C of Red Arrow Subdivision,
(formerly all of Lot 4 of Red Arrow Subdivision)
located in Government Lot 4, Section 31, T3N, R7E, BHM, Meade County, South Dakota

Prepared by:
Fisk Land Surveying &
Consulting Engineers, Inc.
P.O. Box 8154
Rapid City, South Dakota 57709
605-348-1538
Project # 21-03-08

Utility and Minor Drainage Easements:
8' on the interior sides of all lot lines

Building Envelope:
25' Front
25' Rear
8' Side



- LEGEND**
- = Found Survey Monument LS 3095
 - ▼ = Found Rebar (size noted)
 - ⊙ = Set Rebar with cap marked "RW Fisk 6565"

Easement Tie Table

| NUM | BEARING | DISTANCE |
|-----|-------------|----------|
| L1 | S89°49'52"W | 55.53' |
| L2 | N36°08'40"W | 59.35' |
| L3 | N63°23'56"E | 114.38' |
| L4 | S 0°08'36"W | 115.96' |

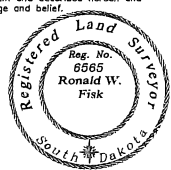
CERTIFICATE OF SURVEYOR
State of South Dakota County of Pennington §

I, Ronald W. Fisk, Registered Land Surveyor No. 6565 in the State of South Dakota, do hereby certify that being so authorized, I made the survey and within plot of the land shown and described hereon and that the same is, in all things, true and correct to the best of my knowledge and belief.

In Witness Whereof, I have hereunto set my hand and official seal

Dated this _____ day of _____, 20 ____.

Ronald W. Fisk
Registered Land Surveyor No. 6565



CERTIFICATE AND ACKNOWLEDGEMENT OF OWNERSHIP
State of South Dakota County of Meade ss

We, Joe Allen and Jo Wayne Allen, do hereby certify that we are the owners of the above described lands and that we did authorize and do hereby approve the survey and within plot of said lands, and that development of this land shall conform to all existing applicable zoning, subdivision and erosion and sediment control regulations.

Joe Allen (Owner) _____ Jo Wayne Allen (Owner) _____

On this _____ day of _____, 20 ____, before me, a Notary Public, personally appeared Joe Allen and Jo Wayne Allen, known to me to be the persons described in the foregoing instrument and acknowledged to me that they signed the same.

Notary Public _____ My Commission Expires _____

CERTIFICATE AND COUNTY TREASURER State of South Dakota County of Meade ss

I, Treasurer of Meade County, do hereby certify that all taxes which are liens upon the within described lands have been fully paid according to the records of my office.

Dated this _____ day of _____, 20 ____

Meade County Treasurer _____

CERTIFICATE OF DIRECTOR OF EQUALIZATION State of South Dakota County of Meade ss

I, Director of Equalization of Meade County, do hereby certify that I have on file in my office a copy of the within plot.

Signed this _____ day of _____, 20 ____ Meade County Director of Equalization _____

APPROVED: _____ DATE: _____

CERTIFICATE OF STREET AUTHORITY State of South Dakota County of Meade ss

The location of the proposed access road to the County or State highway or City Street as shown hereon is hereby approved. Any change in the location of the proposed access shall require additional approval.

Street Authority _____ Date _____

Street Authority _____ Date _____

CERTIFICATE OF FINANCE OFFICER
State of South Dakota City of Summerset §

I, Finance Officer of the City of Summerset, do hereby certify that all special assessments which are liens upon the within described lands are fully paid according to the records of my office.

Dated this _____ day of _____, 20 ____

Finance Officer of the City of Summerset _____

APPROVED BY THE SUMMERSET PLANNING COMMISSION

WHEREAS there has been presented to the Board of Commissioners, the within plot of the above-described lands, and it appears to the Board of Commissioners that:

- (A) The system of streets set forth therein conforms to the system of streets of the existing plots of the city;
- (B) All provisions of the City's subdivision regulations have been complied with;
- (C) All taxes and special assessments upon the tract or subdivision have been fully paid; and
- (D) Such plot and the survey thereof have been executed according to law.

NOW THEREFORE, BE IT RESOLVED that said plot is hereby approved in all respects.

The City's Planning and Zoning Board has reviewed this Minor Plat on this _____ day of _____, 20 ____, and provided a recommendation to the Board of Commissioners _____ Chairman

Dated this _____ day of _____, 20 ____

CERTIFICATE OF THE REGISTER OF DEEDS State of South Dakota County of Meade ss

Filed for record this _____ day of _____, 20 ____ at _____ o'clock _____ M.,

and recorded in Plat Book _____ on Page _____

Meade County Register of Deeds _____ Fees _____



PROPOSED
LOTS 4A, 4B & 4C OF RED ARROW SUBD
IN SECTION 31, T3N, R7E
MEADE COUNTY, SD

FW: Allen - Red Arrow Subdivision - Variance Mailing Receipts

Candace Sealey <csealey@CityofSummerset.onmicrosoft.com>

Fri 7/2/2021 3:18 PM

To: Lisa Schieffer <lschieffer@CityofSummerset.onmicrosoft.com>

Cc: George Mandas <fmfirechief@gmail.com>

 1 attachments (3 MB)

Allen - Red Arrow Subdivision - Variance Mailing Receipts 7-2-21.pdf;

FYI

Candace Sealey
Finance Officer
City of Summerset
(605)718-2164

From: Janelle Finck <janelle@fisklandsurveying.com>

Sent: Friday, July 2, 2021 3:14 PM


To: Candace Sealey <csealey@CityofSummerset.onmicrosoft.com>

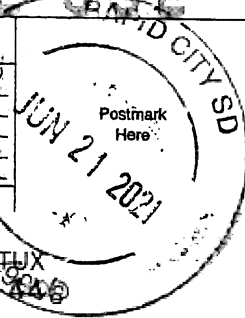
Subject: Allen - Red Arrow Subdivision - Variance Mailing Receipts

Candace:

Attached are copies of the receipts and green cards for the Joe Allen Variance and proposed Lots 4A, 4B and 4C of Red Arrow Subdivision.

Janelle Finck
President
Fisk Land Surveying & Consulting Engineers, Inc.
1022 W Main Street
P.O. Box 8154
Rapid City, SD 57709
(p) 605-348-1538
janelle@fisklandsurveying.com
www.fisklandsurveying.com

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|--|--|---|--|
| <ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. | | A. Signature X <i>Pete Lien</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee | |
| 1. Article Addressed to: Ronald G. Joens ETUX Pete Lien Box 414 PO Box 440 Black Hawk, SD 57718 Rapid City SD 57709 | | B. Received by (Printed Name) JUN 22 2021 C. Date of Delivery | |
| 2. Article Number (Transfer from service label) 7020 0090 0001 4120 2192 | | D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No | |
|  9590 9402 6369 0296 1405 34 | | 3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery (M) | |
| PS Form 3811, July 2020 PSN 7530-02-000-9053 | | Domestic Return Receipt | |

| U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only | |
|--|--|
| For delivery information, visit our website at www.usps.com ®. | |
| OFFICIAL USE | |
| Certified-Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$ |  |
| Postage \$ Total Postage and \$ Sent To Street and Apt. No. City, State, ZIP+4 | PETE LIEN Ronald G. Joens ETUX Box 414 PO Box 440 Black Hawk, SD 57718-5709 RAPID CITY |
| PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions | |

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| <ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. | <p>A. Signature <div style="display: flex; align-items: center;"> X <div style="margin-left: 10px;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div> </div> </p> <p>B. Received by (Printed Name) <div style="display: flex; align-items: center;"> X <div style="border-bottom: 1px solid black; width: 150px;"> Richard D Oxner </div> <div style="margin-left: 10px;"> C. Date of delivery <div style="border-bottom: 1px solid black; width: 100px;"> 7/21/20 </div> </div> </div> </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> |
| <p>1. Article Addressed to:</p> <p style="text-align: center; margin-top: 20px;"> Richard D Oxner ETUX 6651 Anderson Road Black Hawk, SD 57718 </p> <div style="text-align: center; margin-top: 20px;"> 9590 9402 6369 0296 1405 27 </div> | <p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail </div> <div style="width: 35%;"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div> |
| <p>2. Article Number (Transfer from service label)</p> <p style="text-align: center; font-family: monospace; font-size: 1.2em;">7020 0090 0001 4120 2208</p> | <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery</p> |

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

7020 0090 0001 4120 2208

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

RAPID CITY SD

JUL 21 2020

Postage \$

Total Postage at \$

Sent To

Street and Apt. #

City, State, ZIP+4

Richard D Oxner ETUX
6651 Anderson Road
Black Hawk, SD 57718

PS Form 3800, 12015

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|--|--|---|--|
| <p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Ronald G. Joens</i></p> | |
| <p>1. Article Addressed to:</p> <p>Ronald G. Joens ETUX Box 414 Black Hawk, SD 57718</p> | | <p>B. Received by (Printed Name) <i>Ronald Joens</i></p> | <p>C. Date of Delivery <i>6-23-21</i></p> |
| <p>2. Article Number (Transfer from service label) 7020 0090 0001 4120 2185</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p> | |
| <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> | | <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p> | |
| <p>7020 0090 0001 4120 2185</p> | | <p>JUN 23 2021</p> | |

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

| U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only | |
|---|----------------------|
| For delivery information, visit our website at www.usps.com ® | |
| OFFICIAL USE | |
| Certified Mail Fee | \$ |
| Extra Services & Fees (check box, add fees as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |
| Postage | \$ |
| Total Postage and | \$ |
| Sent To | Ronald G. Joens ETUX |
| Street and Apt. No. | Box 414 |
| City, State, ZIP+4 | Black Hawk, SD 57718 |
| PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions | |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Beth Nelson
6731 Anderson Road
Black Hawk, SD 57718



9590 9402 6369 0296 1404 97

2. Article Number (Transfer from service label)

7020 0090 0001 4120 2215

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Mary Beth Nelson*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

MARY B NELSON

C. Date of Delivery

24 JUN 21

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

☐ Mail Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage at

\$

Sent To

Street and Apt. N

City, State, ZIP+4

Mary Beth Nelson
6731 Anderson Road
Black Hawk, SD 57718

57701-9998

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7020 0090 0001 4120 2215

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|--|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | <p>A. Signature X <i>Erin Novotny</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Erin Novotny</i> <input type="checkbox"/> Date of Delivery</p> <p>C. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>D. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> All Restricted Delivery</p> |
| <p>1. Article Addressed to:</p> <p>Jed D Novotny 9417 Sturgis Rd Black Hawk, SD 57718</p> <p>2. Article Number (Transfer from service label) 7020 0090 0001 4120 2222</p> | <p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> All Restricted Delivery</p> |



9590 9402 6369 0296 1405 03

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

| U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only | |
|--|---|
| For delivery information, visit our website at www.usps.com ®. | |
| OFFICIAL USE | |
| <p>Certified Mail Fee \$</p> <p>Extra Services & Fees (check box, add fee if appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and \$</p> <p>Sent To Jed D Novotny 9417 Sturgis Rd Black Hawk, SD 57718</p> <p>Street and Apt. No City, State, ZIP+4®</p> | <p>Postmark Here JUN 21 2021 57701-9998</p> |
| PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions | |

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

War Bonnet Ranch Limited
c/o Rodney L. Vollmer
PO Box 735
Black Hawk, SD 57718



9590 9402 6369 0296 1405 58

2. Article Number (Transfer from service label)

7020 0090 0001 4120 2178

COMPLETE THIS SECTION ON DELIVERY
A. Signature

X Tammra Backes

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Tammra Backes

C. Date of Delivery

6-28-21

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Mail Restricted Delivery

0)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

7020 0090 0001 4120 2178

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage

\$

Total Postage at

\$

Sent To

Street and Apt. #

City, State, ZIP+4

War Bonnet Ranch Limited

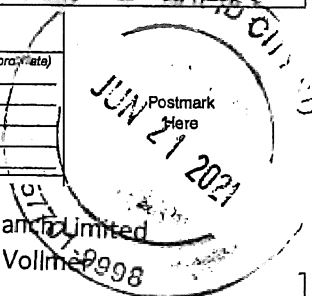
c/o Rodney L. Vollmer

PO Box 735

Black Hawk, SD 57718

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



CITY OF SUMMERSET CODE OF CONDUCT PLANNING & ZONING

PURPOSE - The purpose of this Code of Conduct is to ensure that members, while exercising the duties of their appointment, must be above reproach and avoid the appearance of impropriety. Members shall refrain from conduct, personal charges, or verbal aggression upon the character or motives of other members of the Board of Commissioners, Mayor, staff, or the public. Each member shall conduct himself or herself in a manner that will instill public confidence and trust.

Appointed members of the Summerset City Planning & Zoning Board agree to abide by the following Code of Conduct.

AS A MEMBER, I WILL:

- 1) Represent the Mayor and the Summerset City Commission with dignity and pride by conducting themselves in a businesslike manner and respecting the rights and opinions of fellow Planning & Zoning Board Members.
- 2) Conduct themselves in public as a representative of the City of Summerset, as deemed appropriate.
- 3) Read, respect, and enforce the rules, policies, and guidelines established by the City of Summerset and the Planning & Zoning Board.
- 4) Read and become familiar with local plans, ordinances, and other documents which relate to Planning & Zoning Board functions.
- 5) Continue to gain knowledge and understanding of Planning & Zoning issues which affect our community through study, inquiries, and training.
- 6) Attend meetings of the Planning & Zoning Board on a regular basis and provide prior notification of any necessary absences.
- 7) Read the Planning Meeting Agenda and Reports ahead of time and come prepared to participate in meetings.
- 8) Participate in deliberation at meetings and hearings and refrain from making decisions until adequate information has been provided.
- 9) Give full consideration to all aspects of a plat or project and make decisions based upon the established ordinances, engineering comments, and best interests of the entire community.
- 10) Treat fellow Planning & Zoning Board Members, Staff and the Public with courtesy, even when you may disagree. Insulting, profane or excessive argumentative language, or conduct will not be tolerated.
- 11) Refrain from situations which might appear to compromise judgment, including but not limited to conflicts of interest, voting on the same issue twice by virtue of serving on two different bodies, participating in a voting decision for which I previously served as an advocate, and accepting gifts.