United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form.* If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. **Place additional certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).**

1. Name of Property

historic name _____

other names/site number _____

2. Location

street & number _____ ☐ not for publication

city or town _____ ☐ vicinity

state _____ code _____ county _____ code _____ zip code _____

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended,

I hereby certify that this ___ nomination ___ request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.

In my opinion, the property ___ meets ___ does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:

___ national ___ statewide ___local

_____
Signature of certifying official/Title Date

_____
State or Federal agency/bureau or Tribal Government

In my opinion, the property ___ meets ___ does not meet the National Register criteria.

_____
Signature of commenting official Date

_____
Title State or Federal agency/bureau or Tribal Government

4. National Park Service Certification

I hereby certify that this property is:

___ entered in the National Register ___ determined eligible for the National Register

___ determined not eligible for the National Register ___ removed from the National Register

___ other (explain:) _____

_____
Signature of the Keeper Date of Action

Name of Property

County and State

5. Classification

Ownership of Property
(Check as many boxes as apply.)

- [ ] private
- [ ] public - Local
- [ ] public - State
- [ ] public - Federal

Category of Property
(Check only **one** box.)

- [ ] building(s)
- [ ] district
- [ ] site
- [ ] structure
- [ ] object

Number of Resources within Property
(Do not include previously listed resources in the count.)

Contributing	Noncontributing	
		buildings
		district
		site
		structure
		object
		Total

Name of related multiple property listing
(Enter "N/A" if property is not part of a multiple property listing)

Number of contributing resources previously listed in the National Register

6. Function or Use

Historic Functions
(Enter categories from instructions.)

Current Functions
(Enter categories from instructions.)

7. Description

Architectural Classification
(Enter categories from instructions.)

Materials
(Enter categories from instructions.)

foundation:

walls:

roof:

other:

Name of Property | County and State

Narrative Description

(Describe the historic and current physical appearance of the property. Explain contributing and noncontributing resources if necessary. Begin with **a summary paragraph** that briefly describes the general characteristics of the property, such as its location, setting, size, and significant features.)

Summary Paragraph

Narrative Description

Name of Property

County and State

8. Statement of Significance

Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- [ ] A Property is associated with events that have made a significant contribution to the broad patterns of our history.
- [ ] B Property is associated with the lives of persons significant in our past.
- [ ] C Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- [ ] D Property has yielded, or is likely to yield, information important in prehistory or history.

Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- [ ] A Owned by a religious institution or used for religious purposes.
- [ ] B removed from its original location.
- [ ] C a birthplace or grave.
- [ ] D a cemetery.
- [ ] E a reconstructed building, object, or structure.
- [ ] F a commemorative property.
- [ ] G less than 50 years old or achieving significance within the past 50 years.

Areas of Significance

(Enter categories from instructions.)

Period of Significance

Significant Dates

Significant Person

(Complete only if Criterion B is marked above.)

Cultural Affiliation

Architect/Builder

Period of Significance (justification)

Criteria Considerations (explanation, if necessary)

Name of Property

County and State

Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance and applicable criteria.)

Narrative Statement of Significance (Provide at least **one** paragraph for each area of significance.)

Developmental history/additional historic context information (if appropriate)

Name of Property _____ County and State _____

9. Major Bibliographical References

Bibliography (Cite the books, articles, and other sources used in preparing this form.)

Previous documentation on file (NPS):

____preliminary determination of individual listing (36 CFR 67 has been requested)
____previously listed in the National Register
____previously determined eligible by the National Register
____designated a National Historic Landmark
____recorded by Historic American Buildings Survey #_____
____recorded by Historic American Engineering Record # _____
____recorded by Historic American Landscape Survey # _____

Primary location of additional data:

____State Historic Preservation Office
____Other State agency
____Federal agency
____Local government
____University
____Other
Name of repository: _____

Historic Resources Survey Number (if assigned): _____

10. Geographical Data

Acreage of Property _____
(Do not include previously listed resource acreage.)

UTM References
(Place additional UTM references on a continuation sheet.)

	Zone	Easting	Northing		Zone	Easting	Northing
1				3			
2				4			

Verbal Boundary Description (Describe the boundaries of the property.)

Name of Property | County and State

Boundary Justification (Explain why the boundaries were selected.)

11. Form Prepared By

name/title

organization date

street & number telephone

city or town state zip code

e-mail

Additional Documentation

Submit the following items with the completed form:

- **Maps:** A **USGS map** (7.5 or 15 minute series) indicating the property's location.

  A **Sketch map** for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.

- **Continuation Sheets**

- **Additional items:** (Check with the SHPO or FPO for any additional items.)

Photographs:

Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map.

Name of Property:

City or Vicinity:

County: **State:**

Photographer:

Date Photographed:

Description of Photograph(s) and number:

1 of ___.

Name of Property

County and State

Property Owner:

(Complete this item at the request of the SHPO or FPO.)

name

street & number telephone

city or town state zip code

Paperwork Reduction Act Statement: This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C.460 et seq.).
Estimated Burden Statement: Public reporting burden for this form is estimated to average 18 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Office of Planning and Performance Management. U.S. Dept. of the Interior, 1849 C. Street, NW, Washington, DC.