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.

1. Name of Property

Historic name: _____

Other names/site number: ____

Name of related multiple property listing:

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

2. Location

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 Applicable National Register Criteria:

__A __B __C __D

Signature of certifying official/Title:

Date

State or Federal agency/bureau or Tribal Government

United States Department of the Interior National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018

Property	County and State
In my opinion, the property meets o	does not meet the National Register criter
Signature of commenting official:	Date

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

5. Classification

Ownership of Property

(Check as many boxes Private:	as apply.)
Public – Local	
Public – State	
Public – Federal	

Category of Property

(Check only **one** box.)

Building(s)	
District	
Site	

Sections 1-6 page 2

United States Department of the Interior National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018

Name of Property	County and State
Structure	
Object	

Number of Resources within Property

(Do not include previously listed	d resources in the count)	
Contributing	Noncontributing	
		buildings
		sites
		structures
		objects
		Total

Number of contributing resources previously listed in the National Register _____

6. Function or UseHistoric Functions(Enter categories from instructions.)

Current Functions

(Enter categories from instructions.)

7. Description

Architectural Classification

(Enter categories from instructions.)

Materials: (enter categories from instructions.)
Principal exterior materials of the property: ______

Narrative Description

(Describe the historic and current physical appearance and condition of the property. Describe contributing and noncontributing resources if applicable. Begin with **a summary paragraph** that briefly describes the general characteristics of the property, such as its location, type, style, method of construction, setting, size, and significant features. Indicate whether the property has historic integrity.)

Summary Paragraph

Narrative Description

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.)

- 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

Statement of Significance Summary Paragraph (Provide a summary paragraph that includes level of significance, applicable criteria, justification for the period of significance, and any applicable criteria considerations.)

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

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 _____

Use either the UTM system or latitude/longitude coordinates

Latitude/Longitude Coordinates

Datum if other than WGS84: (enter coordinates to 6 decimal places)	
1. Latitude:	Longitude:
2. Latitude:	Longitude:
3. Latitude:	Longitude:
4. Latitude:	Longitude:

Or UTM References

Datum (indicated on USGS map):

NAD 1927 or	NAD 1983	
1. Zone:	Easting:	Northing:
2. Zone:	Easting:	Northing:
3. Zone:	Easting:	Northing:
4. Zone:	Easting :	Northing:

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

Boundary Justification (Explain why the boundaries were selected.)

11. Form Prepared By

state:	zip code:
	state:

Additional Documentation

Submit the following items with the completed form:

- **Maps:** A **USGS map** or equivalent (7.5 or 15 minute series) indicating the property's location.
- **Sketch map** for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.
- Additional items: (Check with the SHPO, TPO, or FPO for any additional items.)

Photographs

Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels (minimum), 3000x2000 preferred, at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map. Each photograph must be numbered and that number must correspond to the photograph number on the photo log. For simplicity, the name of the photographer, photo date, etc. may be listed once on the photograph log and doesn't need to be labeled on every photograph.

Photo Log

Name of Property:

City or Vicinity:

County:

State:

Photographer:

Date Photographed:

Description of Photograph(s) and number, include description of view indicating direction of camera:

1 of ____.

Paperwork Reduction Act Statement: This information is being collected for nominations 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.). We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for each response using this form is estimated to be between the Tier 1 and Tier 4 levels with the estimate of the time for each tier as follows:

Tier 1 - 60-100 hours Tier 2 - 120 hours Tier 3 - 230 hours Tier 4 - 280 hours

The above estimates include time for reviewing instructions, gathering and maintaining data, and preparing and transmitting nominations. Send comments regarding these estimates or any other aspect of the requirement(s) to the Service Information Collection Clearance Officer, National Park Service, 12201 Sunrise Valley Drive, Room 2C114, Mail Stop 242, Reston, VA 20192.