

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 1 – EVALUATION OF SIGNIFICANCE

NPS Office Use Only

NRIS No:

NPS Office Use Only

Project No:

Instructions: Read the instructions carefully before completing application. No certifications will be made unless a completed application form has been received. Type or print clearly in black ink. If additional space is needed, use continuation sheets or attach blank sheets.

1. **Name of Property:** _____
Address of Property: Street _____
City _____ County _____ State _____ Zip _____
Name of historic district: _____
 National Register district certified state or local district potential district

2. **Check nature of request:**
 certification that the building contributes to the significance of the above-named historic district (or National Register property) for the purpose of rehabilitation.
 certification that the structure or building, and where appropriate, the land area on which such structure or building is located contributes to the significance of the above-named historic district for a charitable contribution for conservation purposes
 certification that the building does not contribute to the significance of the above-named historic district.
 preliminary determination for individual listing in the National Register.
 preliminary determination that a building located within a potential historic district contributes to the significance of the district.
 preliminary determination that a building outside the period or area of significance contributes to the significance of the district.

3. **Project contact:**
Name _____
Street _____ City _____
State _____ Zip _____ Daytime Telephone Number _____

4. **Owner:**
I hereby attest that the information I have provided is, to the best of my knowledge, correct, and that I own the property described above. I understand that falsification of factual representations in this application is subject to criminal sanctions of up to \$10,000 in fines or imprisonment for up to five years pursuant to 18 U.S.C. 1001.
Name _____ Signature _____ Date _____
Organization _____
Social Security or Taxpayer Identification Number _____
Street _____ City _____
State _____ Zip _____ Daytime Telephone Number _____

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The National Park Service has reviewed the "Historic Certification Application – Part 1" for the above-named property and hereby determines that the property:

- contributes to the significance of the above-named district (or National Register property) and is a "certified historic structure" for the purpose of rehabilitation.
- contributes to the significance of the above-named district and is a "certified historic structure" for a charitable contribution for conservation purposes in accordance with the Tax Treatment Extension Act of 1980.
- does not contribute to the significance of the above-named district.

Preliminary determinations:

- appears to meet the National Register Criteria for Evaluation and will likely be listed in the National Register of Historic Places if nominated by the State Historic Preservation Officer according to the procedures set forth in 36 CFR Part 60.
- does not appear to meet the National Register Criteria for Evaluation and will likely not be listed in the National Register.
- appears to contribute to the significance of a potential historic district, which will likely be listed in the National Register of Historic Places if nominated by the State Historic Preservation Officer.
- appears to contribute to the significance of a registered historic district but is outside the period or area of significance as documented in the National Register nomination or district documentation on file with the NPS.
- does not appear to qualify as a certified historic structure.

Date

National Park Service Authorized Signature

National Park Service Office/Telephone No.

**HISTORIC PRESERVATION
CERTIFICATION APPLICATION –
PART 1**

Property Name _____

NPS Office Use Only

Project Number: _____

Property Address _____

5. Description of physical appearance:

Date of Construction: _____ Source of Date: _____

Date(s) of Alteration(s): _____

Has building been moved? yes no If so, when? _____

6. Statement of significance:

7. Photographs and maps.

Attach photographs and maps to application

Continuation sheets attached: yes no