



UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

OMB Approved
No. 1024-0009
Form 10-168
Rev. 2011

HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 1 – EVALUATION OF SIGNIFICANCE

NPS Project Number

Instructions: This page of the form must appear exactly as below and must bear the owner's original signature. Other sections may be expanded as needed or continued on blank pages. The National Park Service certification decision is based on the descriptions in this application form. In the event of any discrepancy between the application form and other, supplementary material submitted with it (such as architectural plans, drawings and specifications), the application form takes precedence. A copy of this form will be provided to the Internal Revenue Service.

1. Property Name _____
Street _____
City _____ County _____ State _____ Zip _____
Name of Historic District _____

☐ National Register district ☐ certified state or local district ☐ potential district

2. Nature of request (check only one box)

- ☐ certification that the building contributes to the significance of the above-named historic district or National Register property for rehabilitation purposes.
- ☐ certification that the building 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 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 (if different from Owner)

Name _____
Street _____ City _____
State _____ Zip _____ Telephone _____

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 USC 1001.

Name _____ Signature _____ Date _____
Organization _____ Social Security OR Taxpayer ID Number _____
Street _____ City _____
State _____ Zip _____ Telephone _____

NPS Official Use Only

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

- ☐ contributes to the significance of the above-named district (or National Register property) and is a "certified historic structure" for rehabilitation purposes.
- ☐ contributes to the significance of the above-named district and is a "certified historic structure" for a charitable contribution for conservation purposes.
- ☐ 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

☐ See Attachments

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Property name _____ NPS Project Number _____

Property address _____

5. Description of physical appearance

Date of construction _____ Source of date _____

Date(s) of alteration(s) _____ Source of date _____

Has building been moved? ☐ no ☐ yes, specify date _____

6. Statement of significance

7. Photographs and maps. Send photographs and map with application.
