Form 10-168a Rev. 12/90

☐ See Attachments

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

OMB Approved No. 1024-0009

HISTORIC PRESERVATION CERTIFICATION APPLICATION PART 2 – DESCRIPTION OF REHABILITATION

	S Office Use Only		NPS Office Use Or	nly		
NRI	S No:		Project No:			
rece the forn	tructions: Read the instructions carefully before completing the applicatived. Type or print clearly in black ink. If additional space is needed, unternal Revenue Service. The decision by the National Park Service on. In the event of any discrepancy between the application form and ot specifications), the application form shall take precedence.	use continuation sheets with respect to certification	or attach blank sheets. A copy of on is made on the basis of the de	this form may be provided to scriptions in this application		
1.	Name of Property:					
	Address of Property: Street					
	City	County	State	Zip		
	☐ Listed individually in the National Register of Historic Places; giv	e date of listing:				
	☐ Located in a Registered Historic District; specify:	-				
	Has a Part 1 Application (Evaluation of Significance) been submitted] yes □ no			
	If yes, date Part 1 submitted: Date of certif	. , _		mber:		
2.	Data on building and rehabilitation project:					
•	Date building constructed:	Total numbe	r of housing units before rehabilita	ation:		
	Type of construction:					
	Use(s) before rehabilitation:					
	Proposed use(s) after rehabilitation:		nat are low-moderate income:	_		
	Estimated cost of rehabilitation:		efore rehabilitation:			
	This application covers phase number of phases		ter rehabilitation:			
	Project/phase start date (est.):					
•		Completion (date (est.).			
3.	Project contact:					
	Name					
	Street State					
	Zip	Dayt	ime releptione 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 t 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	Dayt	ime Telephone Number			
NPS	S Office Use Only					
The	National Park Service has reviewed the "Historic Certification Applica	tion – Part 2" for the abo	ove-named property and has dete	rmined:		
	that the rehabilitation described herein is consistent with the historic the Secretary of the Interior's "Standards for Rehabilitation." This let be issued only to the owner of a "certified historic structure" after ref	ter is a preliminary deter	rmination only, since a format cert			
	that the rehabilitation or proposed rehabilitation will meet the Secret	•				
	that the rehabilitation described herein is not consistent with the hist does not meet the Secretary of the Interior's "Standards for Rehabili					
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Date	e National Park Service Authorized Signa	auure	ivational Park Service	Office/Telephone No.		

		ON APPLICATION -	
Property Na	ame —	PART 2	NPS Office Use Only
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5. DETAIL	LED DESCRIPTION OF REHABILITATION / PRESERVATION WO	RK – Includes site work, new con	nstruction, alterations, etc. Complete blocks below.
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Number 1	Architectural feature	Describe work and impact of	on existing feature:
	Approximate Date of feature		
Describe ex	xisting feature and its condition:		
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Photo no.	Drawing no		
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Number 2	Architectural feature		on existing realure:
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Number	Architectural feature	Describe work and impact of	on existing feature:
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6	Approximate Date of feature	_		
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Number 7	Architectural feature		Describe work and impact on	existing feature:
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Number 10	Architectural feature	Describe work and impact or	n existing feature:
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Number	Architectural feature	Describe work and impact or	n existing feature:
11	Approximate Date of feature	2000 NOW AND IMPACT OF	. Showing routers.
Describe ex	sisting feature and its condition:		
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Number	Architectural feature	Describe work and impact or	n existing feature:
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Number 13	Architectural feature	Describe work and impact on existing feature:	
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Number 14	Architectural feature	Describe work and impact or	n existing feature:
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Describe ex	disting feature and its condition:		
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Number 15	Architectural feature	Describe work and impact or	n existing feature:
Describe ex	Approximate Date of feature		
Describe 6/	ioning routers and its containon.		
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Number	Architectural feature	Describe work and impact or	n existing feature:
16	Approximate Date of feature		·
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18	Approximate Date of feature		
December of	•		
Describe ex	kisting feature and its condition:		
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Number	Architectural feature	Describe work and in	npact on existing feature:
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Photo no.	Drawing no		
Number 20	Architectural feature	Describe work and in	npact on existing feature:
	Approximate Date of feature		
Describe existing feature and its condition:			
Photo no.	Drawing no		