



Town of Marbletown Historic Preservation Commission

MARBLETOWN LANDMARK DESIGNATION APPLICATION

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 _____

<input type="checkbox"/>
<input type="checkbox"/>

not for publication

vicinity

city or town _____

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 _____

5. Classification

Ownership of Property (Check as many boxes as apply.)	Category of Property (Check only one box.)	Number of Resources within Property (Do not include previously listed resources in the count.)
<input type="checkbox"/> Solely owned by you or your spouse	<input type="checkbox"/> Personal residence	
<input type="checkbox"/> Jointly owned by you and your spouse	<input type="checkbox"/> Second residence	
<input type="checkbox"/> Jointly owned by you and someone other than your spouse	<input type="checkbox"/> Rental property	
<input type="checkbox"/> Solely owned by someone other than you or your spouse	<input type="checkbox"/> Commercial property	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

	private
	public - Local
	public - State
	public - Federal

Category of Property (Check only one box.)	Number of Resources within Property (Do not include previously listed resources in the count.)
<input type="checkbox"/> Category 1: Real property owned by the State or a political subdivision of the State, including the State Capitol building, State-owned land, and other real property owned by the State or a political subdivision of the State.	
<input type="checkbox"/> Category 2: Real property owned by a private entity, including a private business, a private nonprofit organization, and other real property owned by a private entity.	
<input type="checkbox"/> Category 3: Personal property owned by the State or a political subdivision of the State, including a vehicle, a piece of equipment, and other personal property owned by the State or a political subdivision of the State.	
<input type="checkbox"/> Category 4: Personal property owned by a private entity, including a vehicle, a piece of equipment, and other personal property owned by a private entity.	

	building(s)
	district
	site
	structure
	object

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

Contributing	Noncontributing	
		buildings
		sites
		structures
		objects
		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.)
--------------------------------------------------------------------	-------------------------------------------------------------------

Current Functions
(Enter categories from instructions.)

7. Description

Architectural Classification (Enter categories from instructions.) **Materials** (Enter categories from instructions.)

Materials
(Enter categories from instructions.)

foundation: _____

walls: _____

roof: _____

other: _____

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

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

Areas of Significance (Enter categories from instructions)

Architecture

Period of Significance

Significant Dates

Significant Person (Complete if Criterion B is marked above)

Cultural Affiliation

Architect/Builder

Narrative Statement of Significance (Explain the significance of the property.)

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.)

1 _____
Zone Easting Northing

3 _____
Zone Easting Northing

2 _____
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

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:**

Photographs (please attach separately):

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.