ARKANSAS HISTORIC PRESERVATION PROGRAM

ARKANSAS HERITAGE SITE REGISTRATION FORM

This form is for use in nominating or requesting determinations for individual properties and districts. Complete each item by marking "x" in the appropriate box or by entering the information requested. If an 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 entries and narrative items on continuation sheets. Use a computer to complete all items.

1. Name of Property

Historic Name _____

Other Names/Site Number _____

2. Location

Street & Number _____

City or Town _____ ☐ Vicinity

County _____ Zip code _____ ☐ Not for Publication

3. State/Federal Agency Certification

As the designated authority under the Arkansas Heritage Sites Act (1-4-134[e][1] Arkansas Code), I hereby certify that this nomination ☐ meets ☐ does not meet the documentation standards and criteria for registering properties as Arkansas Heritage Sites.
(See continuation sheet for additional comments.)

_____

Signature of Certifying Official/Title Date

4. Classification

Ownership of Property
(Check as many boxes as apply)

- ☐ Private
- ☐ Public-Local
- ☐ Public-State
- ☐ Public-Federal

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

- ☐ Building(s)
- ☐ District
- ☐ Site
- ☐ Structure
- ☐ Object
- ☐ Area

Contributing	Non-Contributing	
		Building
		Sites
		Structures
		Objects
		Area
		Total

Property Owner

Name _____

Address _____

City _____ State Code _____

Zip Code _____ Phone _____

Name of Property

County

5. State Review Board

Approval date

Comments

6. Function or Use

Historic Functions
(Enter categories from instructions)

Current Functions
(Enter categories from instructions)

7. Description

Architectural Classification
(Enter categories from instructions)

Materials
(Enter categories from instructions)

Foundation

Walls

Roof

Other

Narrative Description
(Describe the historic and current condition of the property on one or more continuation sheets.)

SEE CONTINUATION SHEET

Name of Property

County

8. Statement of Significance

Applicable Arkansas Heritage Site Criteria
(Mark "x" in one or more boxes for the criteria qualifying the property for Arkansas Heritage Site 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.
- ☐ **E** Property exhibits geographic importance.

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 of age or achieved significance within the past 50 years.

Levels of Significance (State, National)

Areas of Significance (Enter categories from instructions)

Period of Significance

Significant Dates

Significant Person (Complete if Criterion B is marked)

Cultural Affiliation (Complete if Criterion D is marked)

Architect/Builder

Narrative Description
(Describe the historic and current condition of the property on one or more continuation sheets.)
SEE CONTINUATION SHEET

Name of Property _____ County _____

9. Major Bibliographical References

Bibliography
(Cite the books, articles, and other sources used in preparing this form on one or more continuation sheets.)

10. Geographical Data

Acreage of Property _____

UTM References
(Place additional UTM references on a continuation sheet.)

1 Zone _____ Easting _____ Northing _____

2 Zone _____ Easting _____ Northing _____

3 Zone _____ Easting _____ Northing _____

4 _____ _____ _____

☐ See Continuation Sheet

Verbal Boundary Description
(Describe the boundaries of the property on a continuation sheet.)

Boundary Justification
(Explain why the boundaries were selected on a continuation sheet.)

11. Form Prepared By

Name/Title _____
Organization _____ Date _____
Street & Number _____ Telephone _____
City or Town _____ State _____ Zip Code _____

Name of Property

County

Arkansas Heritage Site Continuation Sheet

Section Number _____ Page _____

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ARKANSAS HERITAGE