

STATE OF DELAWARE
HISTORIC PRESERVATION TAX CREDIT APPLICATION
PART 1 - CERTIFICATION OF HISTORIC PROPERTY

OFFICE USE ONLY

NPS No. (if applicable):

OFFICE USE ONLY

Project No:

Instructions: Read the instructions carefully before completing application. No certification will be made unless a completed application form has been received. If additional space is needed, use continuation sheets or attach blank sheets providing property name and address at the top of each sheet.

1. NAME OF PROPERTY:

Address:

City: County State Zip

Name of Historic District:

National Register (NR) historic district Historic district designated under local ordinance

If located in an NR Property which has multiple buildings,

Indicate name of National Register property:

2. NATURE OF REQUEST:

I hereby request Certification that the building indicated above:

contributes to the significance of the above-named historic district.

contributes to the significance of the above-named National Register listed property.

is a locally-designated landmark building which is individually eligible for listing in the National Register of Historic Places

3. APPLICANT:

I hereby attest that the information I have provided is, to the best of my knowledge, correct, and that I fall into the category marked below:

Owner of Record

Developer

Lessee with a remaining lease exceeding five (5) years (attach a copy of the lease)

Resident Curator having life tenancy in the property under an agreement with the owner (attach a copy of the tenancy agreement)

Name: Signature: Date:

Organization: E-mail:

Address:

City: State: Zip: Telephone Number:

4. PROJECT CONTACT (if different from above):

Name:

Organization: E-mail:

Address:

City: State: Zip: Telephone Number:

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The Delaware State Historic Preservation Officer has reviewed the Historic Preservation Tax Credit Application, Part 1 - Certification of Historic Property for the above-named property and has made the following determination.

This property contributes to the significance of the above-named district and is a Certified Historic Property under this Program.

This property contributes to the significance of the above-named NR listed property & is a Certified Historic Property under this Program.

This property meets the National Register Criteria for Evaluation and is a Certified Historic Property under this Program.

This property does not qualify as a Certified Historic Property under this Program.

Date

Delaware State Historic Preservation Officer

Staff Reviewer/Telephone No.

**STATE OF DELAWARE
HISTORIC PRESERVATION TAX CREDIT APPLICATION
PART 1**

Property Name

OFFICE USE ONLY

Project No. _____

Property Address

5. DESCRIPTION OF PHYSICAL APPEARANCE:

Date of Construction: _____ Source of Information: _____

Date(s) of Alteration(s): _____

If building has been moved, indicate from where and when? _____

6. STATEMENT OF SIGNIFICANCE:

7. PHOTOGRAPHS AND MAPS:

Attach photographs and maps to application.

Continuation sheets attached: ___ yes ___ no