

STATE OF MAINE

MAINE HISTORIC PRESERVATION COMMISSION

SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
PART 2 – DESCRIPTION OF REHABILITATION

MHPC Office Use Only

NRIS No:

MHPC Office Use Only

Project No:

Instructions: Read the instructions carefully before completing the applications. No certifications will be made unless a completed application form has been received. Type or print clearly in black ink. If additional space is needed, use continuation sheets or attach blank sheets. A copy of this form may be provided to Maine Revenue Services. The decision by the Director with respect to certification is made on the basis of 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 shall take precedence.

1. Name of Property:

Address of Property: Street

City County State Zip

Listed individually in the National Register of Historic Places; give date of listing:

Located in a Registered Historic District; specify:

Has a Part 1 Application (Evaluation of Significance) been submitted for this project? yes no

If yes, date Part 1 submitted: Date of certification: SPRCA Project Number:

2. Data on building and rehabilitation project:

Date building constructed: Floor area before rehabilitation:

Type of construction: Floor area after rehabilitation:

Use(s) before rehabilitation: Aggregate sq. feet of housing before rehabilitation:

Proposed use(s) after rehabilitation: Aggregate sq. feet of housing after rehabilitation:

Project/phase start date (est.): Completion date (est.):

3. Project contact:

Name

Street City

State Zip Daytime Telephone Number

4. Owner:

I certify on penalty of criminal punishment under the laws of the State of Maine and the United States that I own the property described above, and that the information I have provided is true and accurate to the best of my knowledge and belief.

Name Signature Date

Organization

Street City

State Zip Daytime Telephone Number

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The Director of the Maine Historic Preservation Commission has reviewed the "Small Project Rehabilitation Certification Application – Part 2" for the above-named property and has determined:

- that the rehabilitation described herein is consistent with the historic character of the property or the district in which it is located and that the project meets the Secretary of the Interior's "Standards for Rehabilitation." This letter is a preliminary determination only, since a formal certification of rehabilitation can be issued only to the owner of a "certified historic structure" after rehabilitation work is completed.
that the rehabilitation or proposed rehabilitation will meet the Secretary of the Interior's "Standards for Rehabilitation" if the attached conditions are met.
that the rehabilitation described herein is not consistent with the historic character of the property or the district in which it is located and that the project does not meet the Secretary of the Interior's "Standards for Rehabilitation." A copy of this form may be provided to Maine Revenue Service.

Date Maine Historic Preservation Commission Authorized Signature MHPC Office/Telephone No.

See Attachments

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
PART 2**

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Property Address

5. DETAILED DESCRIPTION OF REHABILITATION / PRESERVATION WORK – Includes site work, new construction, alterations, etc.
Complete blocks below.

NUMBER 1 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 2 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 3 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 4 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
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NUMBER 5 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 6 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 7 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 8 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
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NUMBER 9 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 10 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 11 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 12 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
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Project No:

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NUMBER 13 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 14 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 15 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 16 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

STATE OF MAINE

SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION
PART 2

Property Name

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Project No:

Property Address

NUMBER 17 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 18 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 19 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

NUMBER 20 Architectural feature:

Approximate date of feature:

Describe existing feature and its condition:

Describe work and impact on existing feature:

Photo no(s).

Drawing no(s).

