

STATE OF MAINE  
MAINE HISTORIC PRESERVATION COMMISSION

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
PART 1 – EVALUATION OF SIGNIFICANCE**

**MHPC Office Use Only**

NRIS No: \_\_\_\_\_

**MHPC Office Use Only**

Project No: \_\_\_\_\_

**Instructions:** Read the instructions carefully before completing application. 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.

**1. Name of Property:** \_\_\_\_\_  
Address of Property: Street \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Name of historic district: \_\_\_\_\_  
 National Register district       certified state or local district       potential district

**2. Check nature of request:**  
 certification that the building contributes to the significance of the above-named historic district (or National Register property) for the purpose of rehabilitation.  
 preliminary determination for individual listing in the National Register.  
 preliminary determination that a building located within a potential historic district contributes to the significance of the district.  
 preliminary determination that a building outside the period or area of significance contributes to the significance of the district.

**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 \_\_\_\_\_

**MHPC Office Use Only**

The Director of the Maine Historic Preservation Commission has reviewed the "Small Project Rehabilitation Certification Application – Part 1" for the above-named property and hereby determines that the property:

- contributes to the significance of the above-named district (or National Register property) and is a "certified historic structure" for the purpose of Maine's Small Project Rehabilitation Credit.
- does not contribute to the significance of the above-named district.

**Preliminary determinations:**

- appears to meet the National Register Criteria for Evaluation and will be nominated to the National Register of Historic Places by the Commission according to the procedures set forth in 36 CFR Part 60. The property will become a "certified historic structure" for purposes of Maine's Small Project Rehabilitation Credit if and when the Keeper of the National Register of Historic Places concurs with this finding and lists the property in the National Register of Historic Places.
- does not appear to meet the National Register Criteria for Evaluation and will likely not be listed in the National Register.
- appears to contribute to the significance of a potential historic district, which will likely be listed in the National Register of Historic Places if nominated by the Commission. The property will become a "certified historic structure" for purposes of Maine's Small Project Rehabilitation Credit if and when the district becomes a "registered historic district" pursuant to 36 CFR Part 67.
- appears to contribute to the significance of a registered historic district but is outside the period or area of significance as documented in the National Register nomination or district documentation on file with the Commission. The property will become a "certified historic structure" for purposes of Maine's Small Project Rehabilitation Credit if and when the National Register nomination or district documentation is officially amended pursuant to 36 CFR Part 67.
- does not appear to qualify as a certified historic structure.

\_\_\_\_\_ Date

\_\_\_\_\_ Maine Historic Preservation Commission Authorized Signature

\_\_\_\_\_ MHPC Office/Telephone No.

See Attachments

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION – PART 1**

Property Name \_\_\_\_\_

**MHPC Office Use Only**

Project Number: \_\_\_\_\_

Property Address \_\_\_\_\_

**5. Description of physical appearance:**

Date of Construction: \_\_\_\_\_ Source of Date: \_\_\_\_\_

Date(s) of Alteration(s): \_\_\_\_\_

Has building been moved?  yes  
 no

If so, when? \_\_\_\_\_

**6. Statement of significance:**

**7. Photographs and maps.**

Attach photographs and maps to application.

Continuation sheets attached:  yes  no

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

MHPC Office Use Only

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 Name

**MHPC Office Use Only**

Project No:

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Property Address

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

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**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).

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**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).

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**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).

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**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).

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**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
PART 2**

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Property Name

**MHPC Office Use Only**

Project No:

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Property Address

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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).

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**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).

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**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).

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**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).

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**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
PART 2**

Property Name

**MHPC Office Use Only**

Project No:

Property Address

**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  
PART 2**

Property Name

**MHPC Office Use Only**

Project No:

Property Address

**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).

SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
PART 2

Property Name

**MHPC Office Use Only**

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).

## MAINE HISTORIC PRESERVATION COMMISSION

SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
REQUEST FOR CERTIFICATION OF COMPLETED WORK – PART 3**MHPC Office Use Only**NRIS No: 

**Instructions:** Upon completion of the rehabilitation, return this form with representative photographs of the completed work (both exterior and interior views) to the Maine Historic Preservation Commission. If a Part 2 application has not been submitted in advance of project completion, it must accompany the Request for Certification of Completed Work. A copy of this form may be provided to Maine Revenue Services. Type or print clearly in black ink. The decision of 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 \_\_\_\_\_

Is property a certified historic structure?  yes  no If yes, date of certification by the Director: \_\_\_\_\_

or date of listing in the National Register: \_\_\_\_\_

**2. Data on rehabilitation project:**

Maine Historic Preservation Commission assigned SPRCA project number: \_\_\_\_\_

Project starting date: \_\_\_\_\_

Rehabilitation work on this property was completed and the building placed in service on: \_\_\_\_\_

**3. Owner:** (space on reverse for additional owners)

I hereby apply for certification of rehabilitation work described above for purposes of the State tax incentives. 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 \_\_\_\_\_

**MHPC Office Use Only**

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

- that the completed rehabilitation meets the Secretary of the Interior's "Standards for Rehabilitation and is consistent with the historic character of the property or the district in which it is located. Effective the date indicated below, the rehabilitation of the "certified historic structure" is hereby designated a "certified rehabilitation." A copy of this certification may be required by Maine Revenue Services in order to claim the State tax credit. This letter of certification is to be used in conjunction with appropriate Maine Revenue Services regulations. Questions concerning specific tax consequences or interpretation of the Internal Revenue Code or Title 36 of the Maine Revised Statutes should be addressed to Maine Revenue Services. Completed projects may be inspected by an authorized representative of the Director to determine if the work meets the "Standards for Rehabilitation." The Director reserves the right to make inspections at any time up to five years after completion of the rehabilitation and to revoke certification, if it is determined that the rehabilitation project was not undertaken as presented by the owner in the application form and supporting documentation, or the owner, upon obtaining certification, undertook unapproved further alterations as part of the rehabilitation project inconsistent with the Secretary's "Standards for Rehabilitation."
- that the rehabilitation 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 Services.

Date \_\_\_\_\_

Maine Historic Preservation Commission Authorized Signature \_\_\_\_\_

MHPC Office/Telephone No. \_\_\_\_\_

 See Attachments

**REQUEST FOR CERTIFICATION OF COMPLETED WORK, *continued***

\_\_\_\_\_   
 SPRCA Project No.

Additional Owners:

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_



**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
CONTINUATION / AMENDMENT SHEET**

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Property Name

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Property Address

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**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
CONTINUATION / AMENDMENT SHEET**

\_\_\_\_\_  
Property Name

\_\_\_\_\_  
Property Address

**Instructions.** Read the instruction carefully before completing. Type, or print clearly in black ink. Use this sheet to continue sections of the Part 1 and Part 2 application, or to amend an application already submitted. Photocopy additional sheets as needed.

This sheet: continues Part 1   continues Part 2   amends Part 1   amends Part 2   SPRCA Project Number: \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_

**MHPC Office Use Only**

- The Director of the Maine Historic Preservation Commission has determined that these project amendments meet the Secretary of the Interior's "Standards for Rehabilitation."
- The Director of the Maine Historic Preservation Commission has determined that these project amendments will meet the Secretary of the Interior's "Standard for Rehabilitation" if the attached conditions are met.
- The Director of the Maine Historic Preservation Commission had determined that these project amendments do not meet the Secretary of the Interior's "Standards for Rehabilitation."

\_\_\_\_\_  
Date

\_\_\_\_\_  
Maine Historic Preservation Commission Authorized Signature

\_\_\_\_\_  
MHPC Office/Telephone No.

See Attachments

**SMALL PROJECT REHABILITATION CERTIFICATION APPLICATION  
CONTINUATION / AMENDMENT SHEET**

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Property Name

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Property Address

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