



DEPARTMENT OF HISTORIC RESOURCES

2801 Kensington Avenue, Richmond, Virginia 23221
Telephone: (804) 367-2323 Fax: (804) 367-2391

PRELIMINARY INFORMATION FORM HISTORIC DISTRICT

An historic district is defined as a significant concentration of buildings, structures, or sites that are united historically and aesthetically by plan or physical development. The following constitutes an application for preliminary consideration of eligibility for the nomination potential of a historic district to the Virginia Landmarks Register and the National Register of Historic Places. This does **not** mean that the district is being nominated to the registers at this time. Rather, it is being evaluated to determine if it qualifies for such listings. Applicants will be notified of the staff's and the State Review Board's recommendations.

Contact the Virginia Department of Historic Resources Archivist to determine if previous survey material for this proposed district is on file, and if the district has been previously evaluated by DHR. Obtaining previously recorded information could save a significant amount of time in preparing this Preliminary Information Form (PIF). The archivist may be reached by phone at (804) 367-2323, ext. 124, or by email at Quatro.Hubbard@dhv.virginia.gov. The archivist will also give you the address of the regional office to which you should send your completed PIF materials.

Please type this form and, if additional space is needed, use 8½" x 11" paper. If an electronic version of this PIF is available, it would be helpful if it could be submitted on a disc, or via email to the archivist. Note: All submitted materials become the property of the Virginia Department of Historic Resources and will not be returned.

Photographs: Please provide at least four (4) black and white (B&W) photographs of general streetscapes and four (4) B&W photographs showing a sample of individual buildings within the proposed district. The inclusion of photographs is essential to the completion of this application. **Without photographs, the application cannot be evaluated.** Photographs should be labeled on the reverse side in soft pencil or china marker (not with adhesive labels), and are not to be mounted or affixed in any way.

Digital Images: We cannot accept digital photographs in lieu of 35 mm B&W prints, however we welcome them as supplements.

Maps: Please include two (2) maps showing the location of the proposed district:

- A copy of a USGS Quad map with name of county/city printed on the map and with the name of the proposed district indicating its location (USGS Quadrangle maps can be printed free of charge from www.topozone.com or can be bought from many surveying or engineering supply stores), and
- A map showing a closer picture of the proposed boundaries with street names and/or routes and possible building footprints would also be helpful. Please include a "North" arrow on this map.

Before submitting this form, please make sure that you have included the following:

- Labeled USGS Quadrangle map
- Proposed district boundary map
- 4 labeled B&W general photos
- 4 labeled B&W individual building photos
- Completed Resource Information Sheet, including
 - Applicant contact information and signature
 - City or county official's contact information

Thank you for taking the time to submit this Preliminary Information Form. Your interest in Virginia's historic resources is helping to provide better stewardship of our cultural past.

Virginia Department of Historic Resources PIF Resource Information Sheet

This information sheet is designed to provide the Virginia Department of Historic Resources with the necessary data to be able to evaluate the significance of the district for possible listing in the Virginia Landmarks Register and the National Register of Historic Places. This is not a formal nomination, but a necessary step in determining whether or not the district could be considered eligible for listing. Please take the time to fill in as many fields as possible. A greater number of completed fields will result in a more timely and accurate assessment. Staff assistance is available to answer any questions you have in regards to this form.

General Property Information	For Staff Use Only DHR ID #:
District Name(s): _____	
District or Selected Building Date(s): _____ <input type="checkbox"/> Circa <input type="checkbox"/> Pre <input type="checkbox"/> Post Open to the Public? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Main District Streets and/or Routes: _____ City: _____ Zip: _____	
County or Ind. City: _____ USGS Quad(s): _____	

Physical Character of General Surroundings
Acreage: _____ Setting (choose one): <input type="checkbox"/> City <input type="checkbox"/> Urban <input type="checkbox"/> Town <input type="checkbox"/> Suburban <input type="checkbox"/> Rural <input type="checkbox"/> Transportation Corridor
Site Description Notes/Notable Landscape Features/Streetscapes:
Ownership Categories: <input type="checkbox"/> Private <input type="checkbox"/> Public-Local <input type="checkbox"/> Public-State <input type="checkbox"/> Public-Federal

General District Information
What were the historical uses of the resources within the proposed district? Examples include: Dwelling, Store, Barn, etc...
What are the current uses? (if other than the historical use) _____
Architectural styles or elements of buildings within the proposed district: _____
Architects, builders, or original owners of buildings within the proposed district: _____
Are there any known threats to this district?

General Description of District: (Please describe building patterns, types, features, and the general architectural quality of the proposed district. Include prominent materials and noteworthy building details within the district and a general setting and/or streetscape description.)

Significance Statement: Briefly note any significant events, personages, and/or families associated with the proposed district. It is not necessary to attach lengthy articles or genealogies to this form. Please list all sources of information. Normally, only information contained on this form is forwarded to the State Review Board.

Applicant Information (Individual completing form if other than legal owner of property)			
Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>		
Ms. <input type="checkbox"/>	Miss <input type="checkbox"/>		
_____ (Name)		_____ (Firm)	
_____ (Address)		_____ (City)	_____ (State) _____ (Zip Code)
_____ (Email Address)		_____ (Daytime telephone including area code)	
Applicant's Signature: _____		Date: _____	

Notification			
In some circumstances, it may be necessary for the department to confer with or notify local officials of proposed listings of properties within their jurisdiction. In the following space, please provide the contact information for the local County Administrator or City Manager.			
Mr. <input type="checkbox"/>	Mrs. <input type="checkbox"/>	Dr. <input type="checkbox"/>	
Miss <input type="checkbox"/>	Ms. <input type="checkbox"/>	Hon. <input type="checkbox"/>	
_____ (Name)		_____ (Position)	
_____ (Locality)		_____ (Address)	
_____ (City)	_____ (State)	_____ (Zip Code)	_____ (Daytime telephone including area code)

Please use the following space to explain why you are seeking an evaluation of this district.

Would you be interested in the State and/or the Federal Rehabilitation Tax Credits? Yes No

Would you be interested in the easement program? Yes No