



WISCONSIN  
HISTORICAL  
SOCIETY

This form is used for the state tax credit only.  
If you plan to apply for both state and federal tax  
credits, use federal form 10-168.

## HISTORIC PRESERVATION CERTIFICATION APPLICATION AMENDMENT SHEET

WHS Project Number

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

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

This sheet  amends Part 1  amends Part 2  amends Part 3

### Project Contact (if different from the Owner)

Name \_\_\_\_\_

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

State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

### Owner

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

Organization \_\_\_\_\_ Social Security or Taxpayer ID Number \_\_\_\_\_

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

State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

### WHS Official Use Only

The Wisconsin Historical Society has reviewed this amendment to the Historic Preservation Certification Application and has determined that the amendment:

- Meets the Secretary of the Interior's Standards for Rehabilitation
- Will meet the Secretary of the Interior's Standards for Rehabilitation if the attached conditions are met
- Does not meet the Secretary of the Interior's Standards for Rehabilitation

\_\_\_\_\_

Date

For Daina Penkiunas, State Historic Preservation Officer

## HISTORIC PRESERVATION CERTIFICATION APPLICATION AMENDMENT SHEET

Property name \_\_\_\_\_ WHS Project Number \_\_\_\_\_  
Property address \_\_\_\_\_  
\_\_\_\_\_