**(Revised Oct. 2019)**

**Wisconsin Historical Society**

**Determination of Eligibility Form**

**WisDOT Project ID #:**

|  |  |
| --- | --- |
| **WHS #:** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Property Name(s):** | |  | | | | | | | | | | |
| **Address/Location:** | |  | | | | | | | | | |
| **City & County:** | |  | | | | | | **Zip Code:** | | |  |
| **Town:** |  | | **Range:** | |  | **Section:** |  | | |
| **Date of Construction:** | | | |  | | | | |

|  |
| --- |
| **WisDOT Certification**  As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this request for Determination of Eligibility:  \_\_\_Meets the National Register of Historic Places criteria.  \_\_\_Does not meet the National Register of Historic Places criteria. |
|  |
| **WisDOT Historic Preservation Officer** **Date** |

|  |
| --- |
| **State Historic Preservation Office**  In my opinion, the property:  \_\_\_Meets the National Register of Historic Places criteria.  \_\_\_Does not meet the National Register of Historic Places criteria. |
|  |
| **State Historic Preservation Officer** **Date** |
| **Comments (FOR AGENCY USE ONLY):** |

State Historic Preservation Office

Wisconsin Historical Society

816 State Street

Madison, WI 53706

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Classification:** | | | | | | | | | |
| Ownership | |  | Type of Property: | |  |  | # of Contributing |  | # of Non-Contributing |
|  | private |  |  | building(s) |  | --> |  |  |  |
|  | public |  |  | site |  | --> |  |  |  |
| If public, specify: | |  |  | structure |  | --> |  |  |  |
|  |  | object |  | --> |  |  |  |
|  |  | district |  | Total: |  |  |  |

|  |  |
| --- | --- |
| **Function/Use:** |  |
| Historic Function(s): |  |
| Current Function(s): |  |

|  |  |
| --- | --- |
| **Architectural Style(s):** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria:** | | | | |
|  | A (history) |  | **Areas of Significance:** |  |
|  | B (important persons) |  | **Period of Significance:** |  |
|  | C (architecture/eng.) |  | **Significant Dates:** |  |
|  | D (archaeology) |  | **Significant Person:** |  |
|  |  |  | **Cultural Affiliation:** |  |
|  |  |  | **Architect/Builder:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Criteria Considerations:** | | | | |
|  | A (owned by religious institution) |  |  | E (reconstruction) |
|  | B (moved) |  |  | F (commemorative) |
|  | C (birthplace/grave) |  |  | G (<50 years old) |
|  | D (cemetery) |  |  |  |

**ATTACHMENT CHECKLIST**

Historic boundary map

Labeled, professionally printed color photographs

USGS map with UTM coordinates

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Property Info:** | | | | | | |
| Acreage of Property: | |  | | | |  |
| UTM Reference: |  |  |  |  |  |  |
|  | Zone |  | Easting |  | Northing |  |

**Verbal Boundary Description:**

**Boundary Justification:**

**Methodology:**

*(Describe the steps taken to identify and evaluate the historic property, including research, consultation with WisDOT Environmental Services, and previous eligibility recommendations.)*

**Narrative Description:**

*(Describe the property.)*

|  |  |
| --- | --- |
| CRM Context Chapters: |  |
|  |  |
|  |  |
|  |  |

**Narrative Statement of Significance:**

*(Describe the context in which you have evaluated the property and provide a statement of significance.)*

**Bibliography:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Determination of Eligibility Prepared By:** | | | | | | |
| Name & Company: |  | | | | | |
| Address: |  | | | | Phone: |  |
| City: |  | State: |  | | Zip: |  |
| Email: |  | |  | | Date: |  |
|  |  |  |  | |  |  |
| Sub-contracting to: |  | | | | | |
| Address: |  | | | | Phone: |  |
| City: |  | State: | |  | Zip: |  |
| Email: |  | | |  | Date: |  |