**(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

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| --- |
| **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:**

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