United States Department of the Interior National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form.* If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions.

1. Name of Property
Historic name: Other names/site number:
Name of related multiple property listing:
(Enter "N/A" if property is not part of a multiple property listing
2. Location
Street & number:
City or town: State: County:
Not For Publication: Vicinity:
3. State/Federal Agency Certification
As the designated authority under the National Historic Preservation Act, as amended,
I hereby certify that this <u>X</u> nomination <u>request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.</u>
In my opinion, the property X meets does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance:
nationalstatewidelocal Applicable National Register Criteria:
ABCD
/SHPO
Signature of certifying official/Title: Date
Utah State Historic Preservation Office
State or Federal agency/bureau or Tribal Government

4. National Park Service Certification I hereby certify that this property is: entered in the National Register determined eligible for the National Register determined not eligible for the National Register removed from the National Register other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	County and State
Title: State or Federa or Tribal Gove 4. National Park Service Certification I hereby certify that this property is:entered in the National Registerdetermined eligible for the National Registerdetermined not eligible for the National Registerremoved from the National Registerother (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	nal Register
4. National Park Service Certification I hereby certify that this property is: entered in the National Register determined eligible for the National Register determined not eligible for the National Register removed from the National Register other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	Date
I hereby certify that this property is: entered in the National Register determined eligible for the National Register determined not eligible for the National Register removed from the National Register other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	al agency/burea rnment
entered in the National Registerdetermined eligible for the National Registerdetermined not eligible for the National Registerremoved from the National Registerother (explain:)	
determined eligible for the National Register determined not eligible for the National Register removed from the National Register other (explain:) Signature of the Keeper Date of Act Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
determined not eligible for the National Register removed from the National Register other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
removed from the National Register other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
other (explain:) Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
Signature of the Keeper Date of Act 5. Classification Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
Ownership of Property (Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property (Check only one box.)	ion
(Check as many boxes as apply.) Private: Public – Local Public – State Public – Federal Category of Property	
Public – Local Public – State Public – Federal Category of Property	
Public – State Public – Federal Category of Property	
Public – Federal Category of Property	
Public – Federal Category of Property	
Category of Property	
(Check only one box.)	
Building(s)	
District	

Name of Property County and State Site Structure Object **Number of Resources within Property** (Do not include previously listed resources in the count) Contributing Noncontributing buildings sites structures objects Total Number of contributing resources previously listed in the National Register _____ 6. Function or Use **Historic Functions** (Enter categories from instructions.) **Current Functions** (Enter categories from instructions.)

OMB Control No. 1024-0018

United States Department of the Interior

NPS Form 10-900

National Park Service / National Register of Historic Places Registration Form

National Park Service / National Regis	ster of Historic Places Registration Form	
NPS Form 10-900	OMB Control No. 1024-0018	
Name of Property		County and State

United States Department of the Interior

National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018 Name of Property County and State 7. Description **Architectural Classification** (Enter categories from instructions.) **Materials:** (enter categories from instructions.) Principal exterior materials of the property: **Narrative Description** (Describe the historic and current physical appearance and condition of the property. Describe contributing and noncontributing resources if applicable. Begin with a summary paragraph that briefly describes the general characteristics of the property, such as its location, type, style, method of construction, setting, size, and significant features. Indicate whether the property has historic integrity.)

United States Department of the Interior

Summary Paragraph

United States Department of the Inter National Park Service / National Regi- NPS Form 10-900	of Ster of Historic Places Registration Form OMB Control No. 1024-0018	
Name of Property		County and State
Narrative Description		

United States Department of the Interior National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018

Name of F	у	County and State
8.	ement of Significance	
	ole National Register Criteria " in one or more boxes for the criteria qualifying the property for I	National Register
	A. Property is associated with events that have made a significant broad patterns of our history.	contribution to the
	3. Property is associated with the lives of persons significant in ou	ır past.
	C. Property embodies the distinctive characteristics of a type, periodic construction or represents the work of a master, or possesses his or represents a significant and distinguishable entity whose con individual distinction.	gh artistic values,
	 Property has yielded, or is likely to yield, information importan history. 	t in prehistory or
	Considerations " in all the boxes that apply.)	
	A. Owned by a religious institution or used for religious purposes	
	B. Removed from its original location	
	C. A birthplace or grave	
	D. A cemetery	
	E. A reconstructed building, object, or structure	
	F. A commemorative property	
	G. Less than 50 years old or achieving significance within the past	50 years

National Park Service / National Register of Historic Places Registration Form
NPS Form 10-900

OMB Control No. 1024-0018 Name of Property County and State **Areas of Significance** (Enter categories from instructions.) **Period of Significance Significant Dates Significant Person** (Complete only if Criterion B is marked above.) **Cultural Affiliation** Architect/Builder

United States Department of the Interior

United States Department of the Interior National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018	
Name of Property	County and State
Statement of Significance Summary Paragraph (Provide a summar level of significance, applicable criteria, justification for the period of applicable criteria considerations.)	
Narrative Statement of Significance (Provide at least one paragraph significance.)	n for each area of

National Park Service / National Register of Historic Places Registration Form OMB Control No. 1024-0018 NPS Form 10-900 Name of Property County and State 9. Major Bibliographical References **Bibliography** (Cite the books, articles, and other sources used in preparing this form.) **Previous documentation on file (NPS):** ____ preliminary determination of individual listing (36 CFR 67) has been requested ____ previously listed in the National Register ____previously determined eligible by the National Register ____designated a National Historic Landmark ____ recorded by Historic American Buildings Survey #_____ ____recorded by Historic American Engineering Record # _____ recorded by Historic American Landscape Survey # Primary location of additional data: X State Historic Preservation Office ____ Other State agency ____ Federal agency ____ Local government ___ University ____ Other Name of repository: Historic Resources Survey Number (if assigned): _____

United States Department of the Interior

10. Geographical Data

Acreage of Property _____

United States Department of the Interior
National Park Service / National Register of Historic Places Registration Form
NPS Form 10-900

Name of Property

Use either the UTM system or latitude/longitude coordinates

Use either the UTM system o	r latitude/longitude coor	rdinates	
Latitude/Longitude Coordin Datum if other than WGS84: (enter coordinates to 6 decimal). Latitude:			
2. Latitude:	Longitude:		
3. Latitude:	Longitude:		
4. Latitude:	Longitude:		
Or UTM References Datum (indicated on USGS n	nap): NAD 1983		
1. Zone:	Easting:	Northing:	
2. Zone:	Easting:	Northing:	
3. Zone:	Easting:	Northing:	
4. Zone:	Easting:	Northing:	

Verbal Boundary Description (Describe the boundaries of the property.)

lame of Property		County and State
Boundary Justification (Expl	ain why the boundaries were	e selected.)
11. Form Prepared By		
name/title:		
name/title:organization:		
organization:		
organization:street & number:		
organization:street & number:city or town:	state:	
organization:street & number:	state:	

Additional Documentation

Submit the following items with the completed form:

- Maps: A USGS map or equivalent (7.5 or 15 minute series) indicating the property's location.
- **Sketch map** for historic districts and properties having large acreage or numerous resources. Key all photographs to this map.
- Additional items: (Check with the SHPO, TPO, or FPO for any additional items.)

United States Department of the Interior National Park Service / National Register of Historic Places Registration Form NPS Form 10-900 OMB Control No. 1024-0018 Name of Property County and State **Photographs** Submit clear and descriptive photographs. The size of each image must be 1600x1200 pixels (minimum), 3000x2000 preferred, at 300 ppi (pixels per inch) or larger. Key all photographs to the sketch map. Each photograph must be numbered and that number must correspond to the photograph number on the photo log. For simplicity, the name of the photographer, photo date, etc. may be listed once on the photograph log and doesn't need to be labeled on every photograph. Photo Log Name of Property: City or Vicinity: County: State: Photographer: Date Photographed: Description of Photograph(s) and number, include description of view indicating direction of camera: 1 of . **Property Owner information:**

(Complete this item at the	e request of the SH	IPO or FPO.)	
Name:			
Address:			
City or Town:	State:	Zip code:	
Telephone/email:			

Paperwork Reduction Act Statement: This information is being collected for nominations to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listings. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act. as amended (16 U.S.C.460 et seq.). We may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for each response using this form is estimated to be between the Tier 1 and Tier 4 levels with the estimate of the time for each tier as follows:

United States Department of the Interior National Park Service / National Register of Historic Places NPS Form 10-900		ric Places Registration Form OMB Control No. 1024-0018		
Name of Property	Tier 1 – 60-100 hours Tier 2 – 120 hours Tier 3 – 230 hours		County and State	

The above estimates include time for reviewing instructions, gathering and maintaining data, and preparing and transmitting nominations. Send comments regarding these estimates or any other aspect of the requirement(s) to the Service Information Collection Clearance Officer, National Park Service, 1201 Oakridge Drive Fort Collins, CO 80525.

Tier 4 – 280 hours