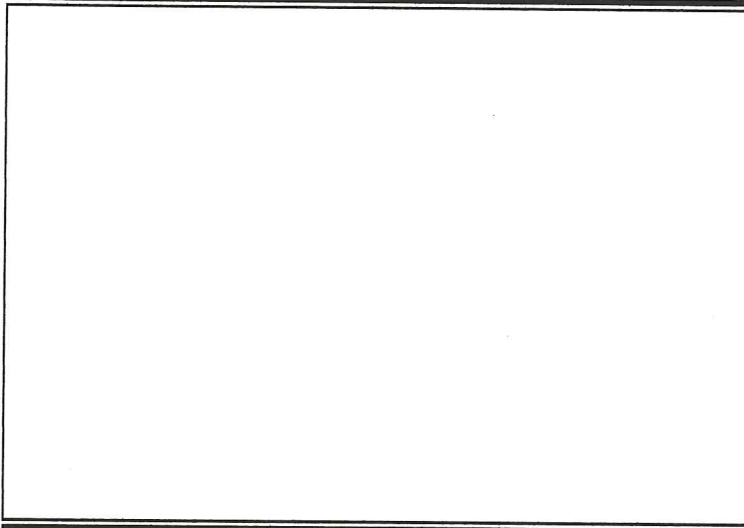


St. Paul Heritage Preservation Commission - Building Inventory Form

Property and Owner Information

<p>Historic Name _____</p> <p>Common Name _____</p> <p>Other Name _____</p> <p>Site Address _____ Zip _____</p> <p>Historic Address _____</p> <p>Current Owner _____</p> <p>Owner Address _____</p> <p>Owner City/State/Zip _____</p>	<p>State Inventory ID _____</p> <p>SHPO Report # _____</p> <p>Property RSN _____</p> <p>PIN _____</p> <p>Zoning _____</p> <p>District _____</p> <p>Ward _____</p> <p>County _____</p>
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- Building Occupied
- Privately Owned
- Public - Locally Owned
- Public - State Owned
- Public - Federal Owned



Location Information

Zone _____ E _____ N _____ Datum _____

Township _____ Range _____ Section _____

Quarters _____ USGS Quad Map _____

Block _____ Lot _____

Addition _____

Photography Information

Photo Date _____ Facing _____

Photographer _____

Name/Frame # _____ Format _____

Notes _____

Significance and Nomination Information

Local

<input type="checkbox"/> Designated District:	<input type="checkbox"/> Eligible District:	<input type="checkbox"/> Designated Site
<input type="checkbox"/> Contributing	<input type="checkbox"/> Contributing	<input type="checkbox"/> Eligible Site
<input type="checkbox"/> Non-contributing	<input type="checkbox"/> Non-contributing	
<input type="checkbox"/> New Construction		

Criterion 1 2 3 4 5 6 7

Context _____

Period of Significance _____

National Historic Landmark Program

Building Removed Date _____

Site Period of Significance _____

Structure _____

Object _____

District _____

State

Designated District Designated Site

Contributing Removed Date _____

Non-contributing

New Construction

Context _____

National Register of Historic Places

Designated Site Removed Date _____

Designated District DOE

Contributing CEF

Non-contributing SEF

New Construction

Criterion A B C D

Criteria Consideration: A B C D E F G

Period of Significance _____

Significant Person: _____ Cultural Affiliation: _____

Note on Significance: _____

Identified Threats: _____

Consultant Recommendation: _____

St. Paul Heritage Preservation Commission - Building Inventory Form

State Inventory ID: _____

Address: _____

Building Information/Historical Background

Name _____ Architect Artist/Designer Builder Engineer Landscape Architect

Name _____ Architect Artist/Designer Builder Engineer Landscape Architect

Name _____ Architect Artist/Designer Builder Engineer Landscape Architect

Original Owner _____ Biography _____

Other Owners & Biographies _____

Original Function/Use _____

Current Function/Use _____ Other Functions/Uses _____

Permit # _____ Date _____ Type _____ Description _____

Permit # _____ Date _____ Type _____ Description _____

Permit # _____ Date _____ Type _____ Description _____

Oral Histories _____ Sanborn/Atlas Info _____

Location of Architectural Drawings _____ City Directory Info _____

Other Sources _____ Historic Photos _____

Historic Background _____

Architectural Information

Style _____ Primary Secondary Element Stories _____ Bays _____

Style _____ Primary Secondary Element Plan Shape _____

Style _____ Primary Secondary Element Roof Shape _____

Materials

Construction Type _____

Foundation _____

Wall (Primary) _____

Wall (Secondary) _____

Roofing _____

Dormer Styles _____ Number _____ Materials _____ Locations _____

Chimney Styles _____ Number _____ Materials _____ Locations _____

Window Styles and Materials _____ Window Conditions _____

Door Styles and Materials _____ Surrounding Land Uses _____

Outbuildings _____ Integrity of Setting _____

Site Features _____ Importance of Setting _____

Property Category _____ Property Type _____

Exterior Description _____

Interior Description _____

General Notes _____

Integrity

Material Condition _____

Design Integrity _____

Alterations _____

Original Site Yes No

Survey Information

Surveyor _____ Survey Level _____

Survey Data Source (City Staff Use Only) _____ Survey Date _____ Updated Survey