



HISTORIC BUILDING SURVEY FORM

I. Location/Ownership

AHC Survey Number:		Form completed by:		Date:	
Property Name:					
Location/Street Address:					
City/Zip:		County:			
USGS Quad:		Township/Range/Section:			
Current Owner's Name & Contact Info (if known):					

2. Physical Description

Construction date:		Source:	
Alteration date:		Source:	
Architect/Builder:		Contractor:	
Physical condition: (Excellent, Good, Fair, Poor, Ruinous)		Remaining historic fabric: (High, Medium, Low)	
No. of stories:			
Historic use of property:			
Current use of property:			
Architectural style category:		Architectural style sub-category:	
Basic typology:		Basic shape:	
Basic floor plan:		Historic Construction material(s):	
Current exterior wall material(s)		Roof finish material(s):	
Main roof configuration:		Foundation material:	
Porch type:			
Window type and materials:			
Describe alterations:			
Number and type of all outbuildings: (if significant, fill out separate survey form)			
Exterior Architectural Description:			
Description of Setting:			
Historical Notes:			

3. Eligibility

Appears Eligible for Alabama Register:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> would contribute to a district	<input type="checkbox"/> Undetermined	
Appears Eligible for National Register:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> would contribute to a district	<input type="checkbox"/> Undetermined	
AR Criteria:	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> Undetermined
NR Criteria:	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> Undetermined
Level of Significance:	<input type="checkbox"/> Local	<input type="checkbox"/> State	<input type="checkbox"/> National	<input type="checkbox"/> Undetermined	
Justification of Eligibility/Ineligibility:					