



**HISTORIC PRESERVATION CERTIFICATION APPLICATION
AMENDMENT / ADVISORY DETERMINATION**

NPS Project Number

Instructions: This page must bear the applicant's original signature and must be dated.

1. **Property name** _____

Property address _____

2. This form includes additional information requested by NPS for an application currently on hold.
 updates applicant or contact information.
 amends a previously submitted Part 1 Part 2 Part 3 application.
 requests an advisory determination that phase _____ of _____ phases of this rehabilitation project meets the Secretary of the Interior's Standards for Rehabilitation. Phase completion date _____
Estimated rehabilitation costs of phase (QRE) _____

Summarize information here; continue on following page if necessary.

3. **Project Contact** (if different from applicant)

Name _____ Company _____

Street _____ City _____ State _____

Zip _____ Telephone _____ Email Address _____

4. **Applicant**

I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that [check one or both boxes, as applicable] (1) I am the owner of the above-described property within the meaning of "owner" set forth in 36 CFR § 67.2 (2011), and/or (2) if I am not the fee simple owner of the above-described property, the fee simple owner is aware of the action I am taking relative to this application and has no objection, as noted in a written statement from the owner, a copy of which (i) either is attached to this application form and incorporated herein, or has been previously submitted, and (ii) meets the requirements of 36 CFR § 67.3(a)(1) (2011). For purposes of this attestation, the singular shall include the plural wherever appropriate. I understand that knowing and willful falsification of factual representations in this application may subject me to fines and imprisonment under 18 U.S.C. § 1001, which, under certain circumstances, provides for imprisonment of up to 8 years.

Name _____ Signature _____ Date _____

Applicant Entity _____ SSN _____ or TIN _____

Street _____ City _____ State _____

Zip _____ Telephone _____ Email Address _____

Applicant, SSN, or TIN has changed since previously submitted application.

NPS Official Use Only

The National Park Service has reviewed this amendment to the Historic Preservation Certification Application and has determined that the amendment:

- meets the Secretary of the Interior's Standards for Rehabilitation.
- will meet the Secretary of the Interior's Standard for Rehabilitation if the attached conditions are met.
- does not meet the Secretary of the Interior's Standards for Rehabilitation.
- updates the information on file and does not affect the certification.

Advisory Determinations:

The National Park Service has determined that the work completed in this phase is consistent with the Secretary of the Interior's Standards for Rehabilitation. This determination is advisory only. A formal certification of rehabilitation can be issued only after all rehabilitation work and any associated site work or new construction have been completed. This approval could be superseded if it is found that the overall rehabilitation does not meet the Secretary's Standards. A copy of this form will be provided to the Internal Revenue Service.

Date

National Park Service Authorized Signature

NPS conditions or comments attached

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