

NDCRS ARCHITECTURAL SITE FORM
PAGE 2—Feature Data

Field Code

SITS# 32

Complete one Page 2 for each architectural feature at the site.

Architectural Feature #

Construction Date	Feature Type	Condition
Feature Date	Context	Plan Shape
Structural System	Primary Exterior	Style
<i>Original</i> Owner's Ethnicity	Secondary Exterior	Architect/Builder

Other Information:

Foundation Stories

Roof/Cornice

Window

Dating Method(s):

Feature Preservation Recommendation(s) (Check all that apply):

Individual nomination

Contributes to a potential district

No nomination potential

Will not contribute to a district

Potential district—feature would be a contributing element if other properties constitute a district

Thematic nomination potential

Component of a historic site or landscape

Moved (specify all applicable choices)—a) relocation occurred within a historic period; b) recreates original site, orientation, landscape, & spatial relationships; c) compatible in context with neighboring structures; d) relocation has damaged eligibility

Historical associations require further investigation

Recorded By

(First Name & Last Name)

Date Recorded

(mm/dd/year)

Instructions to complete a digital version of this form: (1) Download a copy; (2) Open the saved blank copy; (3) Fill out the form; (4) Use the Save As command to rename the form appropriately, and save; (5) **Print** and submit to SHSND.

**NDCRS ARCHITECTURAL SITE FORM
PAGE 3—*Feature Data***

Field Code

SITS# 32

Complete a Page 3 for each feature.

1. *Feature* Description, Integrity, Eligibility:

Recorded By
(First Name & Last Name)

Date Recorded
(mm/dd/year)

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**NDCRS ARCHITECTURAL SITE FORM
PAGE 4—SITE DESCRIPTION**

Field Code

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Complete one Page 4 for the entire site.

2. Owner's Contact Information:

3. Access (to rural areas):

4. Site Area (ft²):

5. Description of **SETTING**:

Recorded By
(First Name & Last Name)

Date Recorded
(mm/dd/year)

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**NDCRS ARCHITECTURAL SITE FORM
PAGE 5—SITE DESCRIPTION**

Field Code

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6. Summary of ALL Site Features & Evaluation of Significance:

7. References/Comments:

Recorded By
(First Name & Last Name)

Date Recorded
(mm/dd/year)

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