



Building Registration Record

Please fill out as much information as you can.

NAME OF PROPERTY

Historic Name:
Other Names:

LOCATION

Address:
City/Town:
Legal Description:

DESCRIPTION Date of Construction: Builder: Architectural Style: Building Materials: Number of Stories: Outbuildings: Original Use: Current Use: Still Standing or Demolished? (If demolished, when?)

Included in the DNR Indiana Historic Sites and Structures Inventory?

HISTORY OF OWNERSHIP

Include dates if known. Feel free to attach additional pages.

Original Owner:

Other Owners:

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NARRATIVE DESCRIPTION

Describe the historic and/or current physical appearance of the building and/or property. Please include any known alterations or events connected to the building. Feel free to attach additional pages.

BIBLIOGRAPHY

Please cite any sources used for which you did not provide a copy of that source. Feel free to attach additional pages.

ADDITIONAL DOCUMENTATION

If possible, please include copies of any maps or photographs that you may come across.

FORM PREPARED BY

Name:

Contact Information (optional):

Date Completed: