

UNITED STATES DEPARTMENT OF THE INTERIOR  
NATIONAL PARK SERVICE

DATA SHEET

FOR NPS USE ONLY

RECEIVED OCT 18 1977

DATE ENTERED MAR 30 1978

NATIONAL REGISTER OF HISTORIC PLACES  
INVENTORY -- NOMINATION FORMSEE INSTRUCTIONS IN *HOW TO COMPLETE NATIONAL REGISTER FORMS*  
TYPE ALL ENTRIES -- COMPLETE APPLICABLE SECTIONS**1 NAME**

HISTORIC Harvard Lampoon Building

AND/OR COMMON The Lampoon Castle

**2 LOCATION**

STREET &amp; NUMBER 44 Bow Street

CITY, TOWN Cambridge

NOT FOR PUBLICATION  
CONGRESSIONAL DISTRICT

STATE Massachusetts

VICINITY OF  
CODE 0258th  
COUNTY Middlesex CODE 017**3 CLASSIFICATION**

| CATEGORY                                        | OWNERSHIP                                   | STATUS                                                | PRESENT USE                                                                                |
|-------------------------------------------------|---------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> DISTRICT               | <input type="checkbox"/> PUBLIC             | <input checked="" type="checkbox"/> OCCUPIED          | <input type="checkbox"/> AGRICULTURE <input checked="" type="checkbox"/> MUSEUM            |
| <input checked="" type="checkbox"/> BUILDING(S) | <input checked="" type="checkbox"/> PRIVATE | <input type="checkbox"/> UNOCCUPIED                   | <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> PARK               |
| <input type="checkbox"/> STRUCTURE              | <input type="checkbox"/> BOTH               | <input type="checkbox"/> WORK IN PROGRESS             | <input checked="" type="checkbox"/> EDUCATIONAL <input type="checkbox"/> PRIVATE RESIDENCE |
| <input type="checkbox"/> SITE                   | <b>PUBLIC ACQUISITION</b>                   | <b>ACCESSIBLE</b>                                     | <input type="checkbox"/> ENTERTAINMENT <input type="checkbox"/> RELIGIOUS                  |
| <input type="checkbox"/> OBJECT                 | <input type="checkbox"/> IN PROCESS         | <input type="checkbox"/> YES: RESTRICTED              | <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> SCIENTIFIC                    |
|                                                 | <input type="checkbox"/> BEING CONSIDERED   | <input checked="" type="checkbox"/> YES: UNRESTRICTED | <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> TRANSPORTATION                |
|                                                 |                                             | <input type="checkbox"/> NO                           | <input type="checkbox"/> MILITARY <input type="checkbox"/> OTHER:                          |

**4 OWNER OF PROPERTY**

NAME The Trustees of the Harvard Lampoon Society, Inc.

STREET &amp; NUMBER 44 Bow Street

CITY, TOWN Cambridge

VICINITY OF

STATE Massachusetts 02138

**5 LOCATION OF LEGAL DESCRIPTION**COURTHOUSE,  
REGISTRY OF DEEDS, ETC. Middlesex County Registry of Deeds

STREET &amp; NUMBER 208 Cambridge Street

CITY, TOWN Cambridge

STATE Massachusetts 02141

**6 REPRESENTATION IN EXISTING SURVEYS**TITLE Survey of Architectural History in Cambridge, Report Four  
Inventory of the Historic Assets of the CommonwealthDATE 1973  
1975☐ FEDERAL ☒ STATE ☐ COUNTY ☒ LOCALDEPOSITORY FOR  
SURVEY RECORDS Cambridge Historical Commission  
Massachusetts Historical CommissionCITY, TOWN Cambridge  
Boston

STATE 02138

Massachusetts 02108

## 7 DESCRIPTION

### CONDITION

☒ EXCELLENT  
☐ GOOD  
☐ FAIR

☐ DETERIORATED  
☐ RUINS  
☐ UNEXPOSED

### CHECK ONE

☐ UNALTERED  
☒ ALTERED

### CHECK ONE

☒ ORIGINAL SITE  
☐ MOVED      DATE \_\_\_\_\_

### DESCRIBE THE PRESENT AND ORIGINAL (IF KNOWN) PHYSICAL APPEARANCE

The Harvard Lampoon Building is located at 44 Bow Street, on the southeastern perimeter of Harvard Square in Cambridge. The structure occupies a triangle bounded by Mt. Auburn Street to the south, Plympton Street to the east, and Bow Street to the north. The immediately surrounding area is commercial encircled by Harvard University buildings.

E.M. Wheelwright, who was then the Boston city architect, was commissioned to design the Lampoon Building in 1909. The triangular -shaped brick building is 2½ stories tall with an intersecting ridge roof. The structure is a parody of the architectural style of late 16th century Holland, designed in the wedge shape dictated by the odd block of land at the intersection of four streets. A domed tower approached by a flight of granite stairs emphasizes the western point of the wedge. The tower houses the formal entrance to the building and an interior spiral staircase. The north and south street elevations of the building each have a projecting eastern and western end bay which feature Gothic tracery windows and medieval stepped gables above. The Renaissance-inspired, regularly fenestrated first floor contrasts with the three stepped gable dormers above on both elevations. One of the most engaging aspects of the structure is the organization of these design elements to produce a whimsical resemblance to an Egyptian sphinx. The rear (eastern) bay on the north and south elevations suggest the haunches of the animal; the fore (western) bays, the "shoulders", plus the two "arms" on each side of the entrance steps emphasize the amusing face-like appearance of the tower. Its high oculus windows, 15th c. Spanish wrought iron crane and lantern, and the rectangular window above the tower door were specifically intended to form an almost-human countenance.

The original "Ludovici" roofing tiles and "Bench" brick (used instead of traditional "Harvard" brick) were employed for their "antique effect" and to enhance surface quality. The use of these materials makes for variation in color, texture, and shape. Wrought iron ornamentation and a variety of tiles are set into the brick in a band around the building and over the gable and dormer windows, also to add textural diversity. Indiana limestone accents the windows and emphasizes the horizontal division between the two main floors. The entrance doors have painted designs imitating Dutch tradition: two diagonals separate triangles of the Lampoon's colors (purple and yellow), while a solid crimson circle stands for Harvard.

The original tile roof was replaced with copper and slate in 1950. The present copper covering ties the tower dome more successfully into the visual unity of the structure by relating it to the copper bell tower which stands at the intersection of the rear (east) roof lines. The tower's copper dome is capped by a filiaree copper finial terminating in the representation of an Ibis, a symbol of the Lampoon. There is a small hip roofed dormer in the dome on line with the tower door. The entrance to the commercial space presently occupied by the Starr Book Shop is on the Plympton Street (east) elevation. The business entrance of the Lampoon is on Bow Street. An entrance into the basement from Mt. Auburn Street is blocked off and no longer used.

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INVENTORY -- NOMINATION FORM**

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CONTINUATION SHEET

Harvard Lampoon  
Building

ITEM NUMBER

7

PAGE 1

Most of the original interior has been well preserved. The most remarkable interior space is the banqueting room, known as the "Great Hall." Here the shape of the building has been used to arrange an elaborate visual joke. Looking from the narrow western end toward the brick arch which separates the chimneyed recess from the length of the hall, the eye is deceived by several ingenious tricks of perspective: the angles of the walls open and the angle of the roof slopes upward increasing the apparent size of the hall; the wooden arches of the cathedral ceiling and the four brass chandeliers likewise increase proportionally in size, exaggerating the length of the line. These arrangements create a sense of distance and grandeur that is out of proportion to the 60' length of the room.

# 8 SIGNIFICANCE

## PERIOD

## AREAS OF SIGNIFICANCE -- CHECK AND JUSTIFY BELOW

|                                           |                                                  |                                                 |                                                 |                                              |
|-------------------------------------------|--------------------------------------------------|-------------------------------------------------|-------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> PREHISTORIC      | <input type="checkbox"/> ARCHEOLOGY-PREHISTORIC  | <input type="checkbox"/> COMMUNITY PLANNING     | <input type="checkbox"/> LANDSCAPE ARCHITECTURE | <input type="checkbox"/> RELIGION            |
| <input type="checkbox"/> 1400-1499        | <input type="checkbox"/> ARCHEOLOGY-HISTORIC     | <input type="checkbox"/> CONSERVATION           | <input type="checkbox"/> LAW                    | <input type="checkbox"/> SCIENCE             |
| <input type="checkbox"/> 1500-1599        | <input type="checkbox"/> AGRICULTURE             | <input type="checkbox"/> ECONOMICS              | <input checked="" type="checkbox"/> LITERATURE  | <input type="checkbox"/> SCULPTURE           |
| <input type="checkbox"/> 1600-1699        | <input checked="" type="checkbox"/> ARCHITECTURE | <input checked="" type="checkbox"/> EDUCATION   | <input type="checkbox"/> MILITARY               | <input type="checkbox"/> SOCIAL/HUMANITARIAN |
| <input type="checkbox"/> 1700-1799        | <input type="checkbox"/> ART                     | <input type="checkbox"/> ENGINEERING            | <input type="checkbox"/> MUSIC                  | <input type="checkbox"/> THEATER             |
| <input type="checkbox"/> 1800-1899        | <input type="checkbox"/> COMMERCE                | <input type="checkbox"/> EXPLORATION/SETTLEMENT | <input type="checkbox"/> PHILOSOPHY             | <input type="checkbox"/> TRANSPORTATION      |
| <input checked="" type="checkbox"/> 1900- | <input type="checkbox"/> COMMUNICATIONS          | <input type="checkbox"/> INDUSTRY               | <input type="checkbox"/> POLITICS/GOVERNMENT    | <input type="checkbox"/> OTHER (SPECIFY)     |
|                                           |                                                  | <input type="checkbox"/> INVENTION              |                                                 |                                              |

SPECIFIC DATES 1909

BUILDER/ARCHITECT Wheelwright & Haven

## STATEMENT OF SIGNIFICANCE

The Harvard Lampoon Building is significant for its architectural quality. The unique building was an attempt to embody the comical nature of the publication in the design of the structure. The success of the design is indicated by the fact that the building has become the trademark of the organization. The building is also significant for its designer, Edmund M. Wheelwright, an alumnus of Harvard, one of the founders of the Lampoon, and the Boston City Architect of the early 20th century. The Harvard Lampoon Building was Wheelwright's last completed design; he suffered a nervous breakdown in 1920 and died shortly thereafter.

The cornerstone of the Lampoon Building was laid June 24, 1909. Though 27 of 80 graduates of the Lampoon were architects in 1910, Wheelwright enjoyed special prominence as one of the original founders of the student humor magazine in 1876. A graduate of Harvard, M.I.T., and L'Ecole des Beaux Arts, Wheelwright was employed by McKim, Mead and White in New York before being hired as Boston City Architect in 1891. In this capacity he was responsible for the design of over 50 municipal buildings during his tenure in office. Other of his extant structures in Boston include the Larz Anderson and Longfellow Bridges, the Massachusetts Historical Society Headquarters, and Horticultural Hall.

The Harvard Lampoon is one of the first college humor magazines in America. Through its alumni, it has spawned such nationally-known publications as the original Life magazine and the National Lampoon. Other prominent members of the Lampoon include C.A. Coolidge (of Shepley, Rutan and Coolidge), Alexander W. Longfellow, Jr. (Cambridge City Hall architect), publisher William Randolph Hearst, philisopher George Santayana, former Cabinet officials Elliot Richardson and William Middendorf, and writers Owen Wister, John P. Marquand, Robert Benchley, George Plimpton, and John Updike.

## 9 MAJOR BIBLIOGRAPHICAL REFERENCES

"The Harvard Lampoon Building; Architectural Criticism", Architecture, Vol. 21, No. 4, April 15, 1910.  
Rettig, R.B., Guide to Cambridge Architecture: Ten Walking Tours, The MIT Press, Cambridge, 1969.  
Wheelwright, E.M., and Burwell, C.B., "The Story of the Lampoon Building", The Harvard Lampoon Centennial Catalogue, 1876-1976, Cambridge, 1976.

## 10 GEOGRAPHICAL DATA

ACREAGE OF NOMINATED PROPERTY less than one acre

UTM REFERENCES

A 19 325600 4692990  
ZONE EASTING NORTHING  
C         

B           
ZONE EASTING NORTHING  
D         

VERBAL BOUNDARY DESCRIPTION

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

| STATE | CODE | COUNTY | CODE |
|-------|------|--------|------|
| STATE | CODE | COUNTY | CODE |

## 11 FORM PREPARED BY

NAME / TITLE Blaine Mallory and Joseph Orfant, National Register Editor  
L. McKay Whatley, Jr., Harvard Lampoon Librarian

ORGANIZATION

Massachusetts Historical Commission

DATE

September 19, 1977

STREET & NUMBER

294 Washington Street

TELEPHONE

617-727-8470

CITY OR TOWN

Boston

STATE

Massachusetts 02108

## 12 STATE HISTORIC PRESERVATION OFFICER CERTIFICATION

THE EVALUATED SIGNIFICANCE OF THIS PROPERTY WITHIN THE STATE IS:

NATIONAL   

STATE   

LOCAL X

As the designated State Historic Preservation Officer for the National Historic Preservation Act of 1966 (Public Law 89-665), I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service.

STATE HISTORIC PRESERVATION OFFICER SIGNATURE

Elizabeth Reed Amason

TITLE Executive Director, Mass. Historical Commission

DATE 9/28/77

FOR NPS USE ONLY

I HEREBY CERTIFY THAT THIS PROPERTY IS INCLUDED IN THE NATIONAL REGISTER

DIRECTOR, OFFICE OF ARCHEOLOGY AND HISTORIC PRESERVATION

ATTEST: Matthew Cole

KEEPER OF THE NATIONAL REGISTER

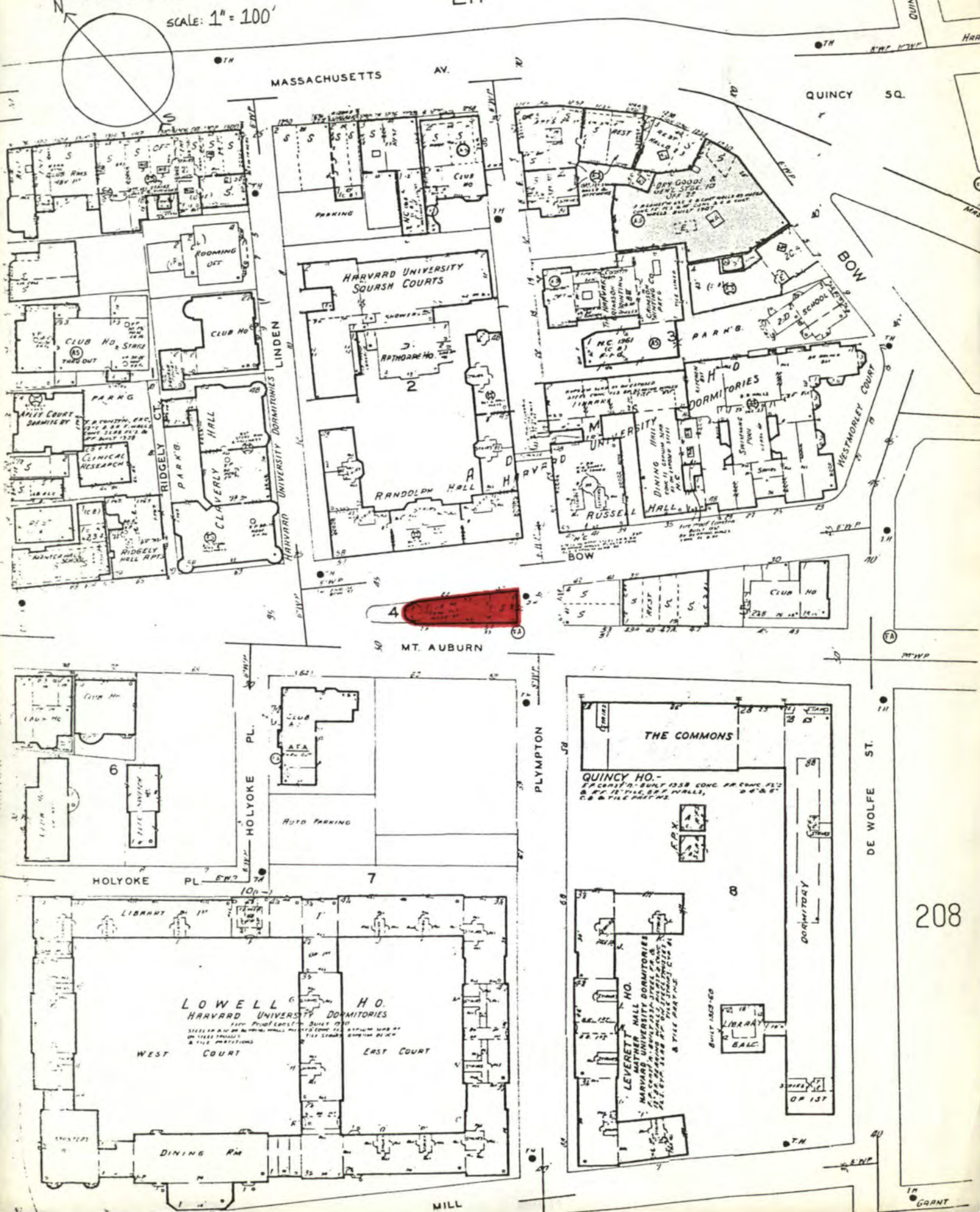
DATE

3-30-78

KEEPER OF THE NATIONAL REGISTER

DATE

3-16-78



MAR 30 1978



Property Harvard Lampoon Building

State MA.

Working Number 10.18.77.1657

Middlesex

TECHNICAL

Photos 2  
Maps 1, Sketch

CONTROL

OK pl  
10.19.77

HISTORIAN

Well presented.

Accept  
1-31-78

Sheff

ARCHITECTURAL HISTORIAN

accept  
Bravham  
12.6.77

ARCHEOLOGIST

OTHER

HAER

Inventory \_\_\_\_\_

Review \_\_\_\_\_

REVIEW UNIT CHIEF

Accept  
Lebovich  
2/16/78

BRANCH CHIEF

KEEPER

Review  
3/30/78

National Register Write-up \_\_\_\_\_

Federal Register Entry 5.2.78

Send-back \_\_\_\_\_

Re-submit \_\_\_\_\_

Entered MAR 30 1978

INT:2106-74



Harvard Lampoon Building  
Cambridge, Massachusetts  
1977

L. McKay Whatley, Jr.

The Harvard Lampoon

44 Bow Street, Cambridge

#1 of 2

South elevation.

OCT 18 1977

Middlesex

County

MAR 30 1978

PROPERTY OF THE NATIONAL REGISTER

The Harvard Lampoon  
View from South  
(no. 1)



Harvard Lampoon Building  
Cambridge, Massachusetts  
1977

L. McKay Whatley, Jr.

The Harvard Lampoon  
44 Bow Street, Cambridge

#2 2

Tower and north elevation.

Middlesex County

MAR 30 1978

OCT 18 1977

PROPERTY OF THE NATIONAL REGISTER

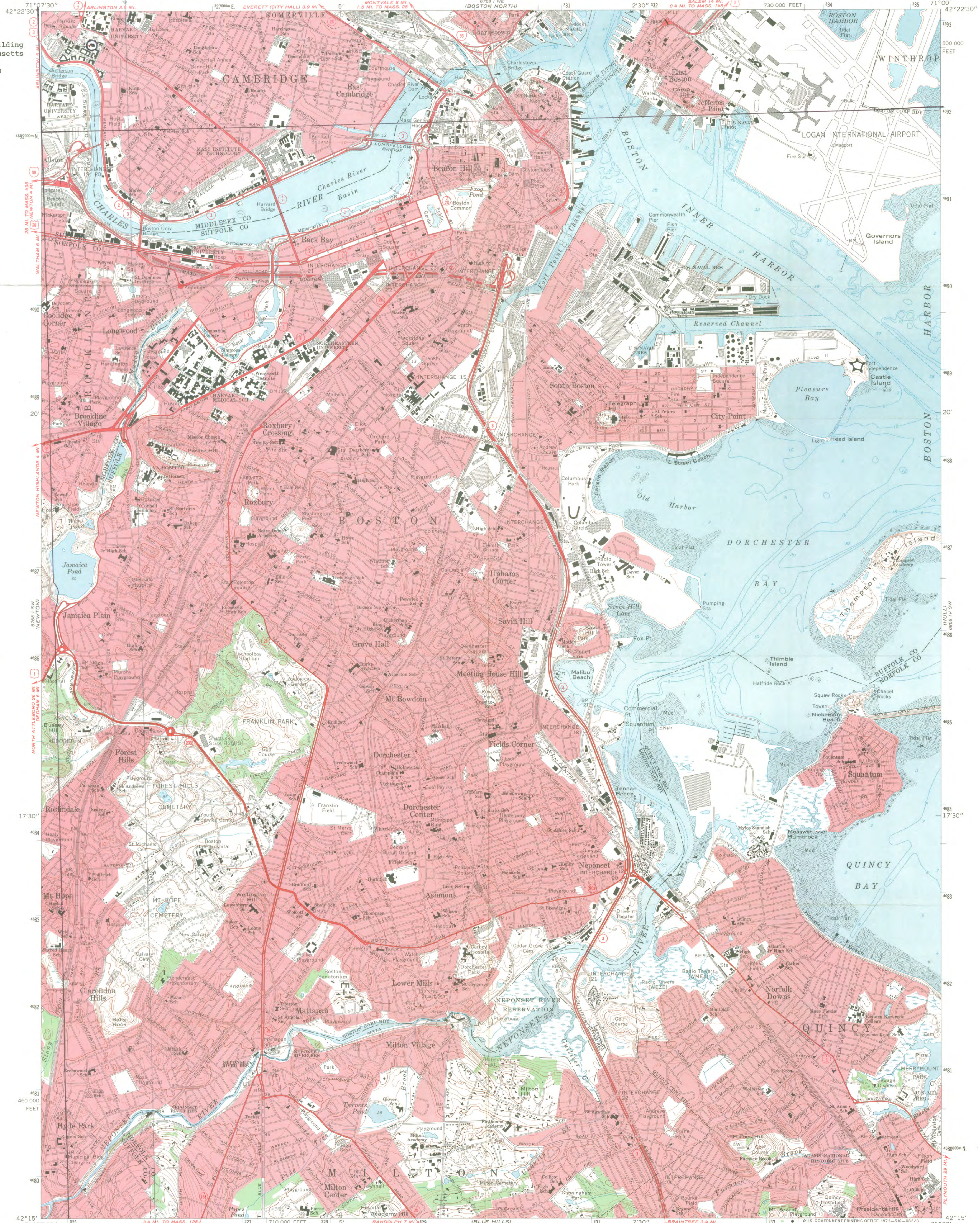
The Harvard Lampoon  
View from NW  
(no. 2)

Harvard Lampoon Building  
Cambridge, Massachusetts  
UTM Coordinates:  
19/325 600/4692 990

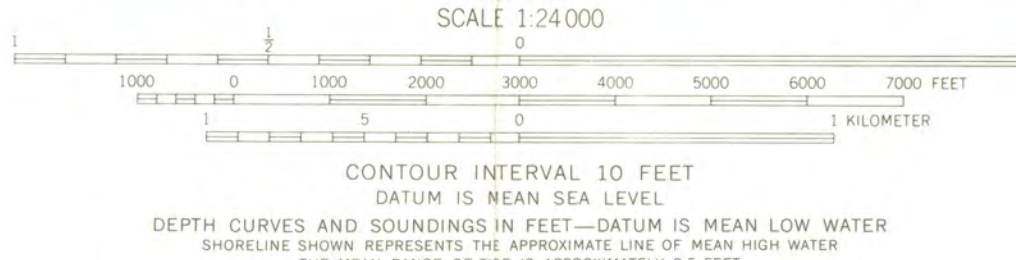
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

COMMONWEALTH OF MASSACHUSETTS  
DEPARTMENT OF PUBLIC WORKS

BOSTON SOUTH QUADRANGLE  
MASSACHUSETTS  
7.5 MINUTE SERIES (TOPOGRAPHIC)



Mapped, edited, and published by the Geological Survey  
Control by USGS, USC&GS, and Massachusetts Geodetic Survey  
Topography by planetable surveys 1943. Revised from  
aerial photographs taken 1969. Field checked 1970  
Selected hydrographic data compiled from USC&GS Charts 246  
and 248 (1971). This information is not intended for navigational  
purposes  
Polyconic projection. 1927 North American datum  
10,000-foot grid based on Massachusetts coordinate system,  
mainland zone  
1,000-meter Universal Transverse Mercator grid ticks,  
zone 19, shown in blue  
Boundaries in tidalwater areas from information supplied  
by Massachusetts Department of Public Works  
Red tint indicates areas in which only landmark buildings are shown



ROAD CLASSIFICATION  
Primary highway,  
hard surface  
Secondary highway,  
hard surface  
Interstate Route  
U. S. Route  
State Route  
Light-duty road, hard or  
improved surface  
Unimproved road  
Interstate Route  
U. S. Route  
State Route

BOSTON SOUTH, MASS.  
N4215-W7100/7.5  
1970  
AMS 6768 I SE-SERIES V814



MAR 30 1978

ENTRIES IN THE NATIONAL REGISTER

STATE      MASSACHUSETTS

Date Entered      MAR 30 1978

Name

Location

Harvard Lampoon Building

Cambridge  
Middlesex County

Butterfield-Whittemore House

Arlington  
Middlesex County

Also Notified

Hon. Edward W. Brooke  
Hon. Edward M. Kennedy  
Hon. Thomas P. O'Neill, Jr.

State Historic Preservation Officer  
Mrs. Elizabeth R. Amadon  
Executive Director, Massachusetts  
Historical Commission  
294 Washington Street  
Boston, Massachusetts 02108

880      Mott/js      4/10/78

# NATIONAL REGISTER DATA SHEET

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
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| <b>① NAME as it appears on federal register:</b><br>Harvard Lampoon Building                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>② OTHER NAMES:</b><br>Lampoon Castle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                            |                                              |  | <b>③ date of entry:</b><br>MAR 30 1978                                                                   |  | <b>④ county code:</b><br>17  |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑤ LOCATION street &amp; number</b><br>44 Bow St.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>city / town</b><br>Cambridge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | <b>vicinity of</b><br>MA                     |  | <b>county</b><br>Middlesex                                                                               |  | <b>⑥ NPS REGION:</b><br>NA   |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑦ OWNER</b> <input checked="" type="checkbox"/> PRIVATE <input type="checkbox"/> STATE <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> COUNTY <input type="checkbox"/> MULTIPLE <input type="checkbox"/> FEDERAL (agency name)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  | <b>⑧ ADMINISTRATOR:</b>                                                                                  |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑨ EXISTING SURVEYS</b> <input type="checkbox"/> HABS <input type="checkbox"/> HAER <input type="checkbox"/> NHL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>⑩ FUNDED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            | <b>⑪ CONGRESS. DISTRICT</b> 8th              |  | <b>⑫ SOURCE of NOMINATION</b> <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEDERAL |  | if state who prepared form?  |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑬ WITHIN NATIONAL REGISTER HISTORIC DISTRICT?</b><br><input type="checkbox"/> YES, NAME <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>⑭ WITHIN NATIONAL HISTORIC LANDMARK?</b><br><input type="checkbox"/> YES, NAME <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                              |  | <b>⑮ ACCESSION</b><br><input type="checkbox"/> LOCAL <input type="checkbox"/> PRIVATE ORGANIZATION       |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑯ CONDITION</b><br><input type="checkbox"/> deteriorated <input type="checkbox"/> altered <input type="checkbox"/> original site<br><input type="checkbox"/> excellent <input type="checkbox"/> ruins <input type="checkbox"/> unaltered <input type="checkbox"/> moved<br><input type="checkbox"/> good <input type="checkbox"/> unexposed <input type="checkbox"/> reconstructed <input type="checkbox"/> unknown<br><input type="checkbox"/> fair <input type="checkbox"/> unexcavated <input type="checkbox"/> excavated                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>⑰ features:</b><br><table style="width:100%;"> <tr> <td style="width:33%;"> <input type="checkbox"/> SUBSTANTIALLY INTACT-1<br/> <input type="checkbox"/> NOT INTACT-0<br/> <input type="checkbox"/> UNKNOWN-4<br/> <input type="checkbox"/> NOT APPLICABLE-7         </td> <td style="width:33%;"> <input type="checkbox"/> SUBSTANTIALLY INTACT-2<br/> <input type="checkbox"/> NOT INTACT-0<br/> <input type="checkbox"/> UNKNOWN-5<br/> <input type="checkbox"/> NOT APPLICABLE-8         </td> <td style="width:33%;"> <input type="checkbox"/> SUBSTANTIALLY INTACT-3<br/> <input type="checkbox"/> NOT INTACT-0<br/> <input type="checkbox"/> UNKNOWN-6<br/> <input type="checkbox"/> NOT APPLICABLE-9         </td> </tr> </table> |                                            |                                              |  |                                                                                                          |  |                              |  | <input type="checkbox"/> SUBSTANTIALLY INTACT-1<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-4<br><input type="checkbox"/> NOT APPLICABLE-7 | <input type="checkbox"/> SUBSTANTIALLY INTACT-2<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-5<br><input type="checkbox"/> NOT APPLICABLE-8 | <input type="checkbox"/> SUBSTANTIALLY INTACT-3<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-6<br><input type="checkbox"/> NOT APPLICABLE-9 |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <input type="checkbox"/> SUBSTANTIALLY INTACT-1<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-4<br><input type="checkbox"/> NOT APPLICABLE-7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> SUBSTANTIALLY INTACT-2<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-5<br><input type="checkbox"/> NOT APPLICABLE-8 | <input type="checkbox"/> SUBSTANTIALLY INTACT-3<br><input type="checkbox"/> NOT INTACT-0<br><input type="checkbox"/> UNKNOWN-6<br><input type="checkbox"/> NOT APPLICABLE-9 |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>⑱ ACCESS</b> <input type="checkbox"/> YES-Restricted <input type="checkbox"/> YES-Unrestricted <input type="checkbox"/> No Access <input type="checkbox"/> Unknown                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>⑲ ADAPTIVE USE</b> <input type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            | <b>⑳ SAVED?</b> <input type="checkbox"/> YES |  | <b>IS PROPERTY A HISTORIC DISTRICT?</b> <input type="checkbox"/> yes <input type="checkbox"/> no         |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉑ AREAS OF SIGNIFICANCE :</b><br><table style="width:100%;"> <tr> <td><input type="checkbox"/> ARCHEOLOGY-prehistoric-2</td> <td><input type="checkbox"/> COMMERCE-6</td> <td><input type="checkbox"/> ENGINEERING-11</td> <td><input type="checkbox"/> LANDSCAPE ARCH.-15</td> <td><input type="checkbox"/> POLITICS / GOVT.-21</td> <td><input type="checkbox"/> RECREATION-28</td> </tr> <tr> <td><input type="checkbox"/> ARCHEOLOGY-historic-1</td> <td><input type="checkbox"/> COMMUNICATIONS-7</td> <td><input type="checkbox"/> ENTERTAINMENT-26</td> <td><input type="checkbox"/> LAW-16</td> <td><input type="checkbox"/> RELIGION-22</td> <td><input type="checkbox"/> SETTLEMENT-29</td> </tr> <tr> <td><input type="checkbox"/> AGRICULTURE-3</td> <td><input type="checkbox"/> CONSERVATION-8</td> <td><input type="checkbox"/> HEALTH-27</td> <td><input type="checkbox"/> LITERATURE-17</td> <td><input type="checkbox"/> SCIENCE-23</td> <td><input type="checkbox"/> URBAN PLANNING-31</td> </tr> <tr> <td><input type="checkbox"/> ARCHITECTURE-4</td> <td><input type="checkbox"/> ECONOMICS-9</td> <td><input type="checkbox"/> INDUSTRY-13</td> <td><input type="checkbox"/> MILITARY-18</td> <td><input type="checkbox"/> SOCIAL / HUMANITARIAN-24</td> <td><input type="checkbox"/> OTHER (SPECIFY)</td> </tr> <tr> <td><input type="checkbox"/> ART-5</td> <td><input type="checkbox"/> EDUCATION-10</td> <td><input type="checkbox"/> INVENTION-14</td> <td><input type="checkbox"/> MUSIC-19</td> <td><input type="checkbox"/> SOCIAL / CULTURAL-30</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td><input type="checkbox"/> PHILOSOPHY-20</td> <td><input type="checkbox"/> TRANSPORTATION-25</td> <td></td> </tr> </table> |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  |                                                                                                          |  |                              |  | <input type="checkbox"/> ARCHEOLOGY-prehistoric-2                                                                                                                           | <input type="checkbox"/> COMMERCE-6                                                                                                                                         | <input type="checkbox"/> ENGINEERING-11                                                                                                                                     | <input type="checkbox"/> LANDSCAPE ARCH.-15 | <input type="checkbox"/> POLITICS / GOVT.-21 | <input type="checkbox"/> RECREATION-28 | <input type="checkbox"/> ARCHEOLOGY-historic-1 | <input type="checkbox"/> COMMUNICATIONS-7 | <input type="checkbox"/> ENTERTAINMENT-26 | <input type="checkbox"/> LAW-16 | <input type="checkbox"/> RELIGION-22 | <input type="checkbox"/> SETTLEMENT-29 | <input type="checkbox"/> AGRICULTURE-3 | <input type="checkbox"/> CONSERVATION-8 | <input type="checkbox"/> HEALTH-27 | <input type="checkbox"/> LITERATURE-17 | <input type="checkbox"/> SCIENCE-23 | <input type="checkbox"/> URBAN PLANNING-31 | <input type="checkbox"/> ARCHITECTURE-4 | <input type="checkbox"/> ECONOMICS-9 | <input type="checkbox"/> INDUSTRY-13 | <input type="checkbox"/> MILITARY-18 | <input type="checkbox"/> SOCIAL / HUMANITARIAN-24 | <input type="checkbox"/> OTHER (SPECIFY) | <input type="checkbox"/> ART-5 | <input type="checkbox"/> EDUCATION-10 | <input type="checkbox"/> INVENTION-14 | <input type="checkbox"/> MUSIC-19 | <input type="checkbox"/> SOCIAL / CULTURAL-30 |  |  |  |  | <input type="checkbox"/> PHILOSOPHY-20 | <input type="checkbox"/> TRANSPORTATION-25 |  |
| <input type="checkbox"/> ARCHEOLOGY-prehistoric-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> COMMERCE-6                                                                                                                                         | <input type="checkbox"/> ENGINEERING-11                                                                                                                                     | <input type="checkbox"/> LANDSCAPE ARCH.-15 | <input type="checkbox"/> POLITICS / GOVT.-21                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> RECREATION-28     |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <input type="checkbox"/> ARCHEOLOGY-historic-1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> COMMUNICATIONS-7                                                                                                                                   | <input type="checkbox"/> ENTERTAINMENT-26                                                                                                                                   | <input type="checkbox"/> LAW-16             | <input type="checkbox"/> RELIGION-22                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> SETTLEMENT-29     |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <input type="checkbox"/> AGRICULTURE-3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> CONSERVATION-8                                                                                                                                     | <input type="checkbox"/> HEALTH-27                                                                                                                                          | <input type="checkbox"/> LITERATURE-17      | <input type="checkbox"/> SCIENCE-23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> URBAN PLANNING-31 |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <input type="checkbox"/> ARCHITECTURE-4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input type="checkbox"/> ECONOMICS-9                                                                                                                                        | <input type="checkbox"/> INDUSTRY-13                                                                                                                                        | <input type="checkbox"/> MILITARY-18        | <input type="checkbox"/> SOCIAL / HUMANITARIAN-24                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> OTHER (SPECIFY)   |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <input type="checkbox"/> ART-5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> EDUCATION-10                                                                                                                                       | <input type="checkbox"/> INVENTION-14                                                                                                                                       | <input type="checkbox"/> MUSIC-19           | <input type="checkbox"/> SOCIAL / CULTURAL-30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                             |                                                                                                                                                                             | <input type="checkbox"/> PHILOSOPHY-20      | <input type="checkbox"/> TRANSPORTATION-25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉒ functions</b><br>WHEN HISTORICALLY SIGNIFICANT:<br>CURRENTLY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>㉓ dates</b> of initial construction:<br>major alterations:<br>historic events:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                            |                                              |  | <b>㉔ ETHNIC GROUP ASSOCIATION</b>                                                                        |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉕ architectural style(s):</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                             |                                                                                                                                                                             |                                             | <b>㉖ architect:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            | <b>㉗ master builder:</b>                     |  | <b>㉘ engineer:</b>                                                                                       |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉙ landscape architect / garden designer:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                             |                                                                                                                                                                             | <b>㉚ interior decorator:</b>                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | <b>㉛ artist:</b>                             |  | <b>㉜ artisan:</b>                                                                                        |  | <b>㉝ builder/contractor:</b> |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉞ NAMES give role &amp; date</b><br>PERSONAL:<br><br>EVENTS:<br><br>INSTITUTIONAL:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |
| <b>㉟ NATIONAL REGISTER WRITE-UP</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            |                                              |  |                                                                                                          |  |                              |  |                                                                                                                                                                             |                                                                                                                                                                             |                                                                                                                                                                             |                                             |                                              |                                        |                                                |                                           |                                           |                                 |                                      |                                        |                                        |                                         |                                    |                                        |                                     |                                            |                                         |                                      |                                      |                                      |                                                   |                                          |                                |                                       |                                       |                                   |                                               |  |  |  |  |                                        |                                            |  |