| •           | NATIONAL REG                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                     | ORI       | CPLA      | CES        | STATE:<br>Tenne<br>COUNTY:<br>Bradl   |          |                       |              |            |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------|-----------|------------|---------------------------------------|----------|-----------------------|--------------|------------|
|             | INVENTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Y - NOMINATI        | ON F      | ORM       |            | FOR NPS US                            | EONLY    |                       |              |            |
|             | (Type all entries                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | – complete appl     | icabl     | e sectio  | ns)        | ENTRY NUMBER                          |          | DATE                  |              |            |
| 1. N        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |           |           |            | <u>1 4 SEP 1972</u>                   | <u> </u> |                       |              |            |
|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |           |           |            |                                       |          |                       |              |            |
|             | R <b>e</b> d Clay                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Council Grou        | und       |           | (Repre     | sentative Lama                        | r Bal    | (er)                  |              |            |
| 4           | AND/OR HISTORIC:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |           |           |            |                                       |          |                       |              |            |
| 1           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |           |           |            |                                       |          |                       |              |            |
| 00000000000 | OCATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                     |           |           |            |                                       |          |                       |              |            |
|             | Blue Spri                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ings Road           |           |           |            |                                       |          |                       |              |            |
| c           | CITY OR TOWN:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |           |           |            |                                       |          |                       |              |            |
|             | Thirteen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | (13) miles S        | Sout      | h of      | Clevela    | nd                                    |          |                       |              |            |
| S           | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ·····               |           | CODE      | COUNTY:    |                                       |          | COD                   |              |            |
| r           | Tennessee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 3                   |           | 47        |            | Bradley                               |          | 011                   |              |            |
| 3. CI       | LASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | I                   | <u></u>   |           |            |                                       | 1        |                       |              |            |
|             | CATEGORY<br>(Check One)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | c                   | WNER      | SHIP      |            | STATUS                                | 1        | ESSIBLE<br>E PUBLI    |              |            |
| -<br> -     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | X Public            |           | Acquisiti |            |                                       | Yes      |                       |              |            |
|             | District Building                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Private             |           | ⊂ In Proc |            | Occupied X Unoccupied                 | C Res    |                       |              |            |
|             | Dbject                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Both                | Ē         | <br>Being | Considered | Preservation work                     | 🛛 Unr    | estricted             |              |            |
|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |           |           |            | in progress                           | No No    |                       |              |            |
| F           | PRESENT USE (Check One or M                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ore as Appropriate) |           |           | ·.         |                                       | 1        |                       |              |            |
|             | Agricultural Go                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | vernment X          | Park      |           |            | Transportation                        |          | nents                 | -            |            |
| 1           | Commercial Inc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Justrial            | Priva     | te Reside | nce        | Other (Specify)                       |          | _                     | _            |            |
| 1           | 🔀 Educational 🗌 Mi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | litary 🗌            | Relig     | ious      | -          |                                       |          |                       | _            |            |
| · [         | 🗌 Entertainment 🛛 🕅 Mu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | seum                | Scien     | tific     | -          |                                       |          |                       | _            |            |
|             | WNER OF PROPERTY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |           |           |            |                                       |          |                       |              |            |
|             | OWNER'S NAME:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |           |           |            |                                       |          |                       | Te           | 515        |
| -           | Bradley Cou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | inty                |           |           |            |                                       | ·        |                       | Tennes       | SIAIE:     |
|             | STREET ARD ROMBER.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                     |           |           |            |                                       |          |                       | es           |            |
| c           | CITY OR TOWN:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                     |           |           | STATE:     | · · · · · · · · · · · · · · · · · · · | T        | CODE                  | se           |            |
|             | Cleveland                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                     |           |           |            | Tennessee                             |          | 47                    | n            |            |
| 5. L        | OCATION OF LEGAL DESC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | RIPTION             |           |           | 1          |                                       |          |                       |              |            |
| c           | COURTHOUSE, REGISTRY OF D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | EEDS, ETC:          |           |           |            |                                       |          |                       | B            | 00         |
|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |           |           |            |                                       |          | 1                     | La<br>La     | COUNTY:    |
|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | unty Register       | r's       | Offic     | е          |                                       |          |                       | ' Ò          |            |
| s           | STREET AND NUMBER:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                     | r's       | Offic     | е          |                                       |          |                       | dle          | · Y :      |
|             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     | r's       | Offic     | C<br>STATE |                                       |          | CODE                  | Bradley      |            |
|             | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                     | r's       | Offic     |            | Tennessee                             |          |                       | dley         | Y:         |
|             | street and number:<br>Court House                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     | r's       | Offic     |            | Tennessee                             |          | <sup>CODE</sup><br>47 | dley         |            |
| c           | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 2                   | r's       | Offic     |            | Tennessee                             | -        |                       | dley         | · · ·      |
| 6. R        | STREET AND NUMBER:<br>Court House<br>CITY OR TOWN:<br>Cleveland                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 2                   | r's       | Offic     |            | Tennessee                             | -        |                       |              |            |
|             | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 2                   |           |           | STATE      |                                       |          | 47                    | 14           |            |
| 6. RI       | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:<br>DATE OF SURVEY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ING SURVEYS         |           | Offic     |            |                                       |          | 47                    | 14           | ENTRY      |
| 6. RI       | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ING SURVEYS         |           |           | STATE      |                                       |          | 47                    | 1 4 SEP      | ENTRY NUMB |
| 6. RI       | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:<br>DATE OF SURVEY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ING SURVEYS         |           |           | STATE      |                                       |          | 47                    | 1 4 SEP 1    | ENTRY      |
| 6. RI       | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:<br>DATE OF SURVEY:<br>DATE OF SURVEY:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ING SURVEYS         |           | Federal   | STATE      |                                       |          | 47                    | 1 4 SEP      | ENTRY NUMB |
| 6 R         | STREET AND NUMBER:<br>COURT HOUSE<br>CITY OR TOWN:<br>Cleveland<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:<br>DATE OF | ING SURVEYS         | R 2 Miles | Federal   | STATE      |                                       | ] Local  | 47                    | 1 4 SEP      | ENTRY NUMB |
|             | STREET AND NUMBER:<br>COURT HOUSE<br>CLEVELAND<br>CLEVELAND<br>EPRESENTATION IN EXIST<br>TITLE OF SURVEY:<br>DATE OF SURVEY:<br>DATE OF SURVEY:<br>DEPOSITORY FOR SURVEY RE<br>STREET AND NUMBER:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ING SURVEYS         | R 2 Miles | Federal   | STATE      |                                       | ] Local  | 47                    | 1 4 SEP 1972 | ENTRY NUMB |

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|                   | (Check One)                                                                                                              |
|-------------------|--------------------------------------------------------------------------------------------------------------------------|
| CONDITION         | (Check One) (Check One)                                                                                                  |
|                   | Altered 🕅 Moved 🖾 Original Site                                                                                          |
| DESCRIBE THE'PR   | RESENT AND ORIGINAL (II known) PHYSICAL APPEARANCE                                                                       |
|                   |                                                                                                                          |
| The Ped           | Clay Council Ground property consists of 150 acres of land,                                                              |
|                   | ete block residence, and a large spring located on the                                                                   |
|                   | rings Road 13 miles South of the industrial city of                                                                      |
|                   | nd in Bradley County, Tennessee, lying immediately North                                                                 |
| of the 1          | Tennessee-Georgia line and the village of Red Clay, Georgia.                                                             |
|                   | a which contained the Chevelop Council House and a number                                                                |
|                   | a which contained the Cherokee Council House and a number<br>buildings, and the spring, is generally level pasture land, |
|                   | ng on the East side of the road which is paved with                                                                      |
| blacktor          |                                                                                                                          |
| _                 |                                                                                                                          |
|                   | aining 125 acres lies on the West side of the road and is                                                                |
| hilly ar          | nd carpeted with a growth of native trees.                                                                               |
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|                   | A RECEIVE 972 E                                                                                                          |
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| PERIOD (Check One or More a                          |                                                                                                                                                                                                                                |                                                                                                                                                             |                                                                                                                 |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| Pre-Columbian                                        | 16th Century                                                                                                                                                                                                                   | 18th Century                                                                                                                                                | 20th Century                                                                                                    |
| 🔲 15th Century                                       | 17th Century                                                                                                                                                                                                                   | 🔀 19th Century                                                                                                                                              |                                                                                                                 |
| SPECIFIC DATE(S) (If Applica                         | ble and Known) 183                                                                                                                                                                                                             | 0's                                                                                                                                                         |                                                                                                                 |
| AREAS OF SIGNIFICANCE (C                             | heck One or More as Appropria                                                                                                                                                                                                  | ate)                                                                                                                                                        |                                                                                                                 |
| Abor iginal                                          | Education                                                                                                                                                                                                                      | 🔀 Political                                                                                                                                                 | 🔲 Urban Planning                                                                                                |
| Prehistoric                                          | Engineering                                                                                                                                                                                                                    | Religion/Phi-                                                                                                                                               | Other (Specify)                                                                                                 |
| K Historic                                           | Industry                                                                                                                                                                                                                       | losophy                                                                                                                                                     | t                                                                                                               |
| Agriculture                                          | Invention                                                                                                                                                                                                                      | Science                                                                                                                                                     |                                                                                                                 |
| Architecture                                         | 🗌 Landscape                                                                                                                                                                                                                    | Sculpture                                                                                                                                                   |                                                                                                                 |
| Art                                                  | Architecture                                                                                                                                                                                                                   | Social/Human-                                                                                                                                               |                                                                                                                 |
| Commerce                                             | Literature                                                                                                                                                                                                                     | itarian                                                                                                                                                     |                                                                                                                 |
| Communications                                       | X Military                                                                                                                                                                                                                     | Theater                                                                                                                                                     |                                                                                                                 |
| X Conservation                                       | Music                                                                                                                                                                                                                          | Transportation                                                                                                                                              |                                                                                                                 |
| by the Cherokee-F<br>the Council grour               | ed Clay Associat                                                                                                                                                                                                               | ion presents a co                                                                                                                                           | erected at the sit<br>oncise history of                                                                         |
|                                                      | RED CLA                                                                                                                                                                                                                        | Y COUNCIL GROUND<br>2 1838                                                                                                                                  | S                                                                                                               |
| 110/                                                 | EAST. AT A FUL<br>OCTOBER, 1835,<br>THE UNITED STAT<br>OF THE CHEROKEE<br>NOW OKLAHOMA, W<br>JOHN HOWARD PAY<br>HOMEY" AND A CH<br>ATTENDED THE CO<br>ATTENDED BY A N<br>STATES AND CHER<br>COUNCIL HOUSE S<br>GREAT COUNCIL S |                                                                                                                                                             | N<br>Y WITH<br>REMOVAL<br>ERRITORY,<br>Y REJECTED.<br>OME, SWEET<br>RIGHTS<br>ALSO<br>NT UNITED<br>THE<br>F THE |
| RECEIVED BIZ AND | DETACHMENT OF T<br>SPRING ABOUT ON<br>OBSERVING MEETI<br>COUNCIL.<br>ONE-HALF MILE S<br>RED CLAY, GEORG<br>ERECTED IN HONC                                                                                                     | AL JOHN E. WOOL<br>ROOPS CAMPED AT<br>RE-FOURTH MILE EA<br>NGS OF THE CHERO<br>OUTH NEAR THE TO<br>GIA, STANDS A U.S<br>OR OF SLEEPING RA<br>VETERAN OF THE | A LARGE<br>ST WHILE<br>KEES IN<br>WN OF<br>. MARKER<br>BBIT, A                                                  |
|                                                      | THE LAST HOME I                                                                                                                                                                                                                | THEAST AT FLINT S<br>IN THE EAST OF JO<br>F OF THE CHEROKEE                                                                                                 | HN ROSS,                                                                                                        |

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| Corn, James Frank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | klin, <u>Farev</u>                                                                                                                                                      | 7el]                   | <u>l the Hills, (N</u>                                                                                                                        | ew York 1971)                                                                                  | •                                            |
| Mooney, James, <u>My</u><br>American Ethr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | yths of the                                                                                                                                                             | <u>C</u>               | herokees, 19th                                                                                                                                | Report Bureau                                                                                  | of                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                         |                        |                                                                                                                                               |                                                                                                |                                              |
| Payne, John Howar<br>Augusta, (Ga.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ) <u>Constitu</u>                                                                                                                                                       | tic                    | onalist, Decemb                                                                                                                               | <u>s Countrymen</u> ,<br>er, 1835.                                                             |                                              |
| Wooten, John M.,<br>1949)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u>A History</u>                                                                                                                                                        | of                     | Bradley County                                                                                                                                | <u>, Tenn</u> . (Nash                                                                          | ville                                        |
| GEOGRAPHICAL DATA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DORDINATES                                                                                                                                                              | 1.                     | LATITUDE AND                                                                                                                                  | LONGITUDE COORDIN                                                                              |                                              |
| DEFINING A RECTANGLE LOCATING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                         | 0<br>- R               | OFLES                                                                                                                                         | TER POINT OF A PRO                                                                             |                                              |
| ORNER LATITUDE<br>Degrees Minutes Seconds Degre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | LONGITUDE                                                                                                                                                               | _                      | LATITUDE<br>Degrees Minutes Seco                                                                                                              | nds. Degrees Minute                                                                            |                                              |
| NW 34 • 59 • 47 • 84                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | lo 57, 04,                                                                                                                                                              |                        | O v                                                                                                                                           | nas Degrees Minure<br>`■ o                                                                     | s Seconds                                    |
| NE 34 • 59 • 43 • 84<br>SE 34 • 59 • 16 • 84                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                         |                        |                                                                                                                                               |                                                                                                | s                                            |
| sw 34.59.16.84                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <u>+ • 57, 08 -</u>                                                                                                                                                     |                        |                                                                                                                                               | <u>`</u>                                                                                       |                                              |
| SPPROXIMATE ACREAGE OF NOMINATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                         | 15                     |                                                                                                                                               | THOUNDARIES                                                                                    |                                              |
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| FORM PRÉPARED BY<br>JAME AND TITLE:<br>James F. Corn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                         |                        | ISI IF                                                                                                                                        | DATE.                                                                                          |                                              |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                         |                        | T <u>ST</u> T¥                                                                                                                                | DATE 4-5-                                                                                      |                                              |
| FORM PRÉPARED BY<br>JAME AND TITLE:<br>James F. Corn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                         |                        | IST IF                                                                                                                                        |                                                                                                | -72                                          |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rian                                                                                                                                                                    |                        | STATE                                                                                                                                         |                                                                                                |                                              |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>HTY OR TOWN:<br>Cleveland                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | rian                                                                                                                                                                    |                        | STATE<br>Tennes                                                                                                                               | 4-5-<br>ssee                                                                                   | <u>соре</u><br>47                            |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rian                                                                                                                                                                    |                        | STATE<br>Tennes                                                                                                                               | <i>*</i> 4–5-                                                                                  | <u>соре</u><br>47                            |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TTY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | rian<br>ICAIION                                                                                                                                                         |                        | STATE<br>Tennes                                                                                                                               | 4-5-<br>ssee                                                                                   | <u>соре</u><br>47                            |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TTY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | rian<br>FICAIION                                                                                                                                                        | 5                      | STATE<br>Tennes                                                                                                                               | 5500<br>GISTER VERIFICATI                                                                      | CODE<br>47<br>ON                             |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TTY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | rian<br>                                                                                                                                                                | S                      | STATE<br>Tennes<br>NATIONAL REP                                                                                                               | 5500<br>GISTER VERIFICATI                                                                      | CODE<br>47<br>ON                             |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off<br>tional Historic Preservation Act of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Ficer for the Na-<br>1966 (Public Law<br>perty for inclusion                                                                                                            | S                      | STATE<br>Tennes<br>NATIONAL REP<br>I hereby certify that th                                                                                   | 5500<br>GISTER VERIFICATI                                                                      | CODE<br>47<br>ON                             |
| FORM PREPARED BY<br>IAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>ITY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off<br>tional Historic Preservation Act of<br>89-665), I hereby nominate this prop                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Ficer for the Na-<br>1966 (Public Law<br>perty for inclusion<br>that it has been                                                                                        | S<br>y<br>1            | STATE<br>Tennes<br>NATIONAL REP<br>I hereby certify that th                                                                                   | 5500<br>GISTER VERIFICATI                                                                      | CODE<br>47<br>ON                             |
| FORM PREPARED BY<br>JAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off<br>tional Historic Preservation Act of<br>89-665), I hereby nominate this prop<br>in the National Register and certify                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Ficer for the Na-<br>1966 (Public Law<br>berty for inclusion<br>that it has been<br>and procedures se                                                                   | s<br>v<br>n<br>et      | STATE<br>Tennes<br>NATIONAL REG<br>I hereby certify that th<br>National Register.<br>Rugut                                                    | SSEE<br>DISTER VERIFICATI<br>nis property is include                                           | CODE<br>47<br>ON<br>ed in the                |
| FORM PREPARED BY<br>TAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TTY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off<br>tional Historic Preservation Act of<br>89-665), I hereby nominate this prop<br>in the National Register and certify<br>evaluated according to the criteria a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Fian<br>Ficer for the Na-<br>1966 (Public Law<br>perty for inclusion<br>that it has been<br>and procedures se<br>The recommende                                         | s<br>v<br>n<br>et      | STATE<br>Tennes<br>NATIONAL REP<br>I hereby certify that th                                                                                   | 4-5-<br>SSEE<br>DISTER VERIFICATI<br>nis property is include                                   | CODE<br>47<br>ON<br>ed in the                |
| FORM PREPARED BY<br>IAME AND TITLE:<br>James F. Corn<br>DRGANIZATION<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. BOX 67<br>ITY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Offi<br>tional Historic Preservation Act of<br>89-665), I hereby nominate this prop<br>in the National Register and certify<br>evaluated according to the criteria a<br>forth by the National Park Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Fian<br>Ficer for the Na-<br>1966 (Public Law<br>perty for inclusion<br>that it has been<br>and procedures se<br>The recommende                                         | s<br>v<br>n<br>et      | STATE<br>Tennes<br>NATIONAL REG<br>I hereby certify that th<br>National Register.<br>Rugut                                                    | 4-5-<br>SSEE<br>DISTER VERIFICATI<br>nis property is include                                   | CODE<br>47<br>ON<br>ed in the                |
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| FORM PREPARED BY<br>TAME AND TITLE:<br>James F. Corn<br>Bradley County Histor<br>TREET AND NUMBER:<br>P. O. Box 67<br>TY OR TOWN:<br>Cleveland<br>STATE LIAISON OFFICER CERTIF<br>As the designated State Liaison Off<br>tional Historic Preservation Act of<br>89-665), I hereby nominate this prop<br>in the National Register and certify<br>evaluated according to the criteria a<br>forth by the National Park Service.<br>level of significance of this nomina                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Fian<br>Ficer for the Na-<br>1966 (Public Law<br>berty for inclusion<br>that it has been<br>and procedures se<br>The recommende<br>ition is:                            | s<br>v<br>n<br>et      | STATE<br>Tennes<br>NATIONAL REG<br>I hereby certify that th<br>National Register.<br>Chief, Office of Arche<br>G/14/2                         | 4-5-<br>SSEE<br>DISTER VERIFICATI<br>nis property is include                                   | CODE<br>47<br>ON<br>ed in the                |
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| Form 10-3000 UNITED STATES DEPARTMENT OF THE INTERIOR                                                                                            | STATE              | ·     |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------|
| (July 1969) NATIONAL PARK SERVICE                                                                                                                | Tennessee          |       |
| NATIONAL REGISTER OF HISTORIC PLACES                                                                                                             | COUNTY             |       |
| INVENTORY PNOMINATION FORM                                                                                                                       | Bradley            |       |
| NY LIND ON THOMAN ION JORM                                                                                                                       | FOR NPS USE ONL    | Y     |
| (Convinuation Sheet)                                                                                                                             | ENTRY NUMBER       | DATE  |
|                                                                                                                                                  | 1 4 SEP 1972       |       |
| The Council Spring mentioned on the marker flo<br>500,000 gallon of clear cold water every twent                                                 | -                  |       |
| Following the enactment of punitive and restration against the Cherokees by the Georgia legislatu 1830, the Cherokee Nation in 1832 moved the me | ure in 1828, 1829, | , and |

A crucial meeting of the council in October, 1835, was attended by the famous John Howard Payne, internationally known author, playwrite and actor, best known as the author of the song, "Home, Sweet Home" who made a written record of the meeting. The Council was addressed by the Rev. John F. Schermerhorn, a Baptist minister appointed by President Andrew Jackson, to negotiate a voluntary removal treaty with the Cherokees, whatever the means required. Also present were Major B. F. Curry, United States Indian Agent, Col. William N. Bishop, of the Georgia Guard, Chief John Ross, and Elias Boudinot, Major Ridge, John Ridge and other leaders of the treaty party. Military observers detailed from the Regular Army of the United States, who were camped at a large spring one-fourth mile east of the Council Ground, also attended the council. At the close of a harangue by Schermerhorn, called Devil's Horn by the Cherokees, the assembly of several thousand Indians rejected the proposed treaty by an overwhelming majority vote. Incidentally, by the provisions of the Cherokee Constitution all males 18 years old or over were The following December Schermerhorn met with a qualified voters. small group of treaty party members at New Echota, Georgia, and negotiated a treaty considered fraudulent by Chief John Ross and all but a small minority of the Cherokees.

The treaty of removal negotiated by Schermerhorn in 1835 was overwhelmingly rejected at another Council of the Cherokee Nation held at the Red Clay Council Ground in September, 1836. More than 3000 Cherokees attended the meeting, which was observed and officially reported by Brigadier General John E. Wool, of the United States Army, then in command of all troops participating in the forced removal activities on behalf of the whites. Chief John Ross presided at the Council, which was attended by the leaders of both parties of the Cherokee Nation. The meeting was featured by an address of John Mason, Jr., a Special Agent of the United States, whose explanation of the treaty was strikingly similar to Schermerhorn's speech at the 1835 meeting and considered by the great majority of the Indians to be heavily larded with hypocrisy and vain promises of alleged benefits. The vote of rejection was unanimous, even the treaty men refraining from voting for it for fear of their lives.

| Form  | 10-300a |
|-------|---------|
| (July | 1969)   |

#### UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

# NATIONAL REGISTER OF HISTORIC PLACES

## INVENTORY - NOMINATION FORM

| STATE           |      |
|-----------------|------|
| Tennessee       |      |
| COUNTY          |      |
| Bradley         |      |
| FOR NPS USE ONL | Y    |
| ENTRY NUMBER    | DATE |
| 1 4 SEP WAL     |      |

### (Continuation Sheet)

## (Number all entries) Statement of Significance page 3.

The Council Ground site of 150 acres has been acquired by Bradley County, with the assistance of the Department of Conservation of Tennessee and the benefit of a grant from the United States, and is being developed by the County Conservation Board of Bradley County as a historic shrine and park. The program includes the building of a replica of the Council house and adjacent log buildings, planting the Council ground with forest trees, beautification of the Council spring area with plantings of native wild flowers, completing a headquarters and museum, and the building of nature trails throughout the wooded area of some 125 acres. The second phase contemplates construction of an outdoor theatre in a suitable location already selected by the Board.



