

**WISCONSIN HISTORIC BUILDING CODE
VERIFICATION OF HISTORIC STATUS**

INSTRUCTIONS: In order to utilize the historic building code, your building must be verified as being a "qualified historic building." To obtain verification, you must complete this form and mail it to either the State Historical Society, or to an authorized representative of your municipality, as indicated below. Please include with your application, photographs of the outside of the building. The photos should illustrate the building from the most visible sides. (In item #2 below, eligibility for the national register must be formally determined under the section 106 compliance process, or the tax credit certification process. If this determination has not already been made, a "Historic Preservation Certification Application -- Evaluation of Significance" should be completed and submitted to the State Historical Society for their review. Please contact the Society at (608)264-6491 for a copy of this form.)

HISTORIC STATUS OF PROPERTY (CHECK ONE)

- 1. Property is listed on, or nominated to be listed on, the national register of historic places in Wisconsin or the state register of historic places.
- 2. Property is eligible for listing on the national register of historic places in Wisconsin or the state register of historic places.
- 3. Property contributes to the historic significance of a district which is listed on, or nominated to be listed on, the national register of historic places in Wisconsin or the state register of historic places.

MAIL FORM TO:
BUILDING CODE VERIFICATION
Historic Preservation Division
State Historical Society
816 State Street
Madison, Wisconsin 53706

- 4. Property contributes to a historic district listed in a certified municipal register.
- 5. Property is individually listed in a certified municipal register of historic property.

MAIL FORM TO: The authorized official in your municipality. Contact your local government for more information.

BUILDING AND OWNERSHIP DATA

NAME AND ADDRESS OF OWNER: _____

Telephone number of owner during day _____

ADDRESS OF HISTORIC BUILDING: _____

HISTORIC NAME OF BUILDING (IF KNOWN): _____

NAME OF HISTORIC DISTRICT (IF APPLICABLE): _____

FOR STATE HISTORICAL SOCIETY USE ONLY

I hereby verify that the above-mentioned property is a qualified historic building for purposes of the Wisconsin Historic Building Code.

DATE SIGNATURE: STATE HISTORIC PRESERVATION OFFICER

FOR CERTIFIED MUNICIPAL USE ONLY

I hereby verify that the above-mentioned property is a qualified historic building for purposes of the Wisconsin Historic Building Code.

DATE SIGNATURE: AUTHORIZED MUNICIPAL OFFICIAL