

Interior Wall Covering: _____

Foundation: None Sedimentary rock Pier & beam Concrete slab
 Other _____

Roof Material: Wood shingle Composition asphalt shingle tile or slate
 Metal Built up composition asphalt Other _____

Number of Stories: One Two Three Other _____

Porches: North East South West None

Description of Porches: _____

Chimney(s):

Number of chimneys _____ Exterior _____ Interior _____

Type of Construction _____

Windows:

Steel Jalousie Flat Arched Louvered Bay
 Parallel Ribbon
 Wood
 Single hung Double hung Sash Stationary
 Glazing

Structural Condition: (indicate excellent, good, fair, poor)

Walls _____ Roof _____ Foundation _____

Condition of Building or Structure:

Well maintained Poorly maintained
 Deteriorating Dilapidated

Indicate any special items of interest and exterior architectural ornamentation:

Original Paint Color: Exterior _____ Interior _____

Provide detailed description of Alterations, Additions, Remodeling, Replacements:

(attached additional sheet if necessary)

OTHER DESIGNATIONS: (Indicate date received or in the process of obtaining)

- ___ National Register of Historic Places
- ___ National Historic Landmark
- ___ Listed in Historic American Buildings Survey
- ___ Historic American Engineering Record
- ___ Texas Historic Landmark
- ___ Smith County Historic Landmark
- ___ Other

EVALUATION OF SIGNIFICANCE:

Historic ___ National ___ Regional ___ State ___ County ___ City
 Architectural: ___ Architect ___ Builder ___ Motif ___ Period ___ Craftmanship
 Cultural: ___ Ethnic ___ Person ___ Location ___ Relationship to site

Attach copies of documents of historical and bibliographical resources and references used.

NOMINATION FORM PREPARED BY:

Name: _____ Owner's Signature: _____
 Address _____ Date: _____

 Phone _____

Agent and Organization _____

SUBMIT APPLICATION TO:
 Tyler Historic Preservation Board
 c/o Marolee Lunsford/Planner
 Planning and Zoning Department
 City of Tyler
 P. O. Box 2039
 Tyler, Texas 75710

For Office Use Only:

Date THPB Recommended _____
 Date City Council Approved _____