



## REVIEW REQUEST SUBMITTAL

State Form 55031 (R / 4-17)

Indiana Department of Natural Resources

Division of Historic Preservation and Archaeology, Indiana State Historic Preservation Office (SHPO)



**Please complete this form and attach it to the front of all submittals, along with any reports or supplemental materials you are providing to the Indiana DHPA for review. Please note that archaeological and structural information can be submitted together but should be separate documents since archaeological site locations are confidential and not for public disclosure.**

Date (month, day, year): \_\_\_\_\_

- ☐ This is a new submittal.
- ☐ This is revised/additional information relating to DHPA number \_\_\_\_\_.
- ☐ This project is being undertaken pursuant to the terms and conditions of a programmatic or other interagency agreement.  
Title of Agreement: \_\_\_\_\_
- ☐ This project will also be applying for Federal Rehabilitation Investment Tax Credit.
- ☐ This project includes work on a property that is under a preservation covenant held by DHPA.

### **THIS REVIEW REQUEST SUBMITTED BY:**

Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

### **PROJECT NAME & LOCATION** [Please attach a map with location(s) marked]

Project Name/Reference: \_\_\_\_\_ Project/Des Number: \_\_\_\_\_

Project Address/Location: \_\_\_\_\_

City: \_\_\_\_\_ Township(s): \_\_\_\_\_

County/Countries: \_\_\_\_\_

Section/Township/Range: \_\_\_\_\_

Latitude/Longitude: \_\_\_\_\_

### **STATE OR FEDERAL AGENCY INVOLVEMENT**

Agency: \_\_\_\_\_ Program: \_\_\_\_\_

Type of funds, license, or permit to be obtained (if applicable): \_\_\_\_\_

Name of Agency Contact: \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**APPLICANT (if different than Federal Agency)** *If available, please attach copy of authorization letter from federal agency.*

Applicant: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Address (*number and street*): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**ADDITIONAL CONTACT (IF APPLICABLE)**

Name of Contact: \_\_\_\_\_

Organization/Agency: \_\_\_\_\_

Address (*number and street*): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

**Project Description** – This should include a detailed scope of work, including any actions to be taken in relation to the project, such as all aspects of new construction, replacement/repair, demolition, ground disturbance, and all ancillary work (temporary roads, etc.), as applicable. Attach report or additional pages if necessary. If a detailed scope of work is not available yet, please explain and include all preliminary information.

**Ground Disturbing Activity** – This should include a detailed description of all horizontal and vertical ground disturbance in relation to the project as well as any known previous and current land use, condition, and disturbances. Attach report or additional pages if necessary. Indicate if the project does not include any ground disturbing activities. Please note that agricultural tilling generally does not have a serious enough impact on archaeological sites to constitute a disturbance of the ground for this purpose.

**FINDINGS** – Please note that a finding should only be submitted when the agency/delegatee believes it is appropriate or one has been requested by our office. Only those who represent the Federal Agency or an official delegatee of the federal agency are authorized to make findings of effect for an undertaking.

☐ **No Historic Properties Affected** – (i.e., none are present or there are historic properties present but the project will have no effect upon them). Attach necessary documentation, as described at 36 CFR 800.11.

☐ **No Adverse Effect** – The proposed undertaking will have no adverse effect on one or more historic properties located within the project APE under 36 CFR 800.5. Attach necessary documentation, as described at 36 CFR 800.11.

☐ **Adverse Effect** – The proposed undertaking will result in an adverse effect to one or more historic properties and the applicant, or other federally authorized representative, will consult with the SHPO and other consulting parties to resolve the adverse effect per 36 CFR 800.6. Attach necessary documentation, as described at 36 CFR 800.11, with a proposed plan to resolve adverse effect(s).

**Please explain the basis for your determination.**

Authorized Signature: \_\_\_\_\_ Date (month, day, year): \_\_\_\_\_

Type or print name: \_\_\_\_\_

Organization/Agency: \_\_\_\_\_

**Please note that incomplete submissions may result in delays. To ensure an expeditious review, please be sure that the following has been provided:**

- ☐ Completed Review Request Submittal Form
- ☐ Letter of authorization from Federal agency/agencies *(if applicable)*
- ☐ Consulting Parties – List of all consulting parties that have been invited to participate and copies of any responses received. Typical consulting parties would include the county historian, local historical society, the appropriate regional office of Indiana Landmarks, other local, state or national preservation organizations, tribes, local government and the general public.
- ☐ Map of project location with project area(s) and Area of Potential Effects (APE) clearly marked, streets labeled and a north arrow, aerial maps are preferable and areas of previous ground disturbance within the project area should be shown. Please indicate if any of the project area is located on state or federal property.
- ☐ Clear, current color photographs of project area and APE, including any buildings or structures fifty (50) years or older within the APE. (No more than two (2) photographs per page, for large project areas/APEs photographs can be provided digitally on a CD but must be clearly labeled.)
- ☐ Architectural/Engineering Drawings *(if applicable)* – Must be labeled with north arrow, clearly indicate proposed changes to existing buildings and locations of any ground disturbance on site plans. When possible include both existing and proposed drawings. Hard copies should be provided at no smaller than 11" x 17" and font must be legible; if the drawings are large scale reduced to 11" x 17", please also provide a CD with a PDF copy of the drawings.
- ☐ Identification of any known historic resources – All projects should consult the SHAARD database (access available on the DHPA home page) to locate known historic resources in the project area and APE. For any identified resources, the submission should include (in summary form) a list of the properties identified, including address, the site/reference number from SHAARD, the rating (IHSSI, Bridge Inventory) or status (National Register) of each property, and a current photograph. Please do not submit print outs of the individual SHAARD records.

**Please note that at this time we are unable to accept electronic submissions. The thirty (30) day review period, as specified in 36 CFR part 800.3(c)(4), begins from the date that we receive the hard copy of the submission.**

**Return this Form and Attachments to:**

**Indiana Department of Natural Resources  
Division of Historic Preservation and Archaeology  
402 W. Washington Street, Room W274  
Indianapolis, Indiana 46204**

<http://www.in.gov/dnr/historic>