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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | State Historic Preservation Office  Online Section 106 Project Form For  Individual Standing Structures | | | | | | NESHPO Use Only | | |
| Date Received | | HP Number |
|  | |  |
|  | | | | | | | | | |
| Submission of a completed Project Information Form with adequate information and attachments constitutes a request for review pursuant to Section 106 of the National Historic Preservation Act of 1966 (as amended). More information may be required to adequately complete the Section 106 process. Submit completed form to [HN.HP@nebraska.gov](mailto:HN.HP@nebraska.gov).  NOTE: *Section 106 regulations provide for a 30-day response time by the Nebraska State Historic Preservation Office from the date of receipt.* | | | | | | | | | |
| PROJECT NAME (if applicable | | | | | | | | PROJECT NUMBER (if applicable) | |
|  | | | | | | | |  | |
| COUNTY | | STREET ADDRESS (No P.O. Box Numbers) | | | | | | CITY | |
|  | |  | | | | | |  | |
| FEDERAL AGENCY OR DESIGNEE | | | | | | | | | |
|  | | | | | | | | | |
| CONTACT PERSON | | | CITY, STATE ZIP | | | | | TELEPHONE | |
|  | | |  | | | | |  | |
| EMAIL (for response) | | | | | | | | | |
|  | | | | | | | | | |
| **PROJECT DESCRIPTION** | | | | | | | | | |
| Briefly describe the overall project. | | | | | | | | | |
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|  | | | | | | | | | |
| **STRUCTURES (rehabilitation, demolition, additions to or construction near existing structures)** | | | | | | | | | |
| To the best of your knowledge, is the structure located in any of the following? | | | | | | | | | |
| An area previously surveyed for historic properties. | | | | National Register District | | | Local Landmark District | | |
| If yes, please provide the name of the survey or district. | | | |  | | | | | |
|  | | | | | | | | | |
| If known, please provide a brief history of the building(s), including construction dates and building uses. | | | | | | | | | |
|  | | | | | | | | | |
| **PHOTOGRAPHS** | | | | | | | | | |
| Please provide photographs of all structures. Photographs of neighboring or nearby buildings are helpful. Go to page 2 to insert photo(s). | | | | | | | | | |
|  | | | | | | | | | |
| **NESHPO USE ONLY** | | | | | | | | | |
| **Nebraska SHPO Determination** | | | | | | | | | |
| There are **No Historic Properties** in the area of potential effect | | | | | The project will have **No Adverse Effect with Conditions** (see attached) | | | | |
| The project will have **No Effect** on historic properties | | | | | The project will have **Adverse Effects** on historic properties (see attached) | | | | |
| The project will have **No Adverse Effect** on historic properties | | | | | **The SHPO requests additional information** (see attached) | | | | |
|  | | | | |  |  | | | |
| Review & Compliance Coordinator  State Historic Preservation Office, Nebraska State Historical Society | | | | |  | Date | | | |
|  | | | | | | | | | |

 

 