



STATE HISTORIC PRESERVATION TAX CREDIT APPLICATION

PART 1 – HISTORIC SIGNIFICANCE

State Historic Preservation Office

Michigan Strategic Fund

Revised 12/2023

SHPO USE ONLY

State Project Number

1. Resource Information

Historic Property Name \_\_\_\_\_

Address: Street \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Name of historic district or listed property \_\_\_\_\_

Name of local unit of government \_\_\_\_\_

2. Nature of Request (check only one)

Certification that the resource:

Is listed individually or contributes to a historic district listed in the National Register of Historic Places.

Is listed individually or contributes to a historic district listed in the State Register of Historic Sites.

Contributes to a 1970 PA 169, MCL 399.201 to 399.215 local historic district.

Declaration of Location Form is complete and attached.

3. Applicant (Owner or lessee)

Name \_\_\_\_\_ Organization Name \_\_\_\_\_

Name \_\_\_\_\_ (For co-owner or married owners, as applicable)

Mailing Address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime telephone number \_\_\_\_\_ E-mail \_\_\_\_\_

Social Security Number(s) or Taxpayer Identification Number(s): \_\_\_\_\_

Proof of Ownership document is attached.

*I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that I am a Qualified taxpayer as set forth in subsection 266(a)(16)(j) or subsection 676(16)(j) of PA 343 of 2020*

Signature (sign in ink) \_\_\_\_\_ Date \_\_\_\_\_

Signature (sign in ink) \_\_\_\_\_ Date \_\_\_\_\_



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4. Project Contact (if different than applicant)

Name \_\_\_\_\_ Organization Name \_\_\_\_\_

Address: Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime telephone number \_\_\_\_\_ E-mail \_\_\_\_\_

5. Application Processing Fee

[ ] The \$ \_\_\_\_\_ Part 1 review fee is included with this application (\$50 for residential applications and \$100 for commercial applications). Make checks payable to the State of Michigan-MSF.

6. State Historic Preservation Tax Credit Category

Owner-occupied residential

Small commercial (less than \$2 million in qualified rehabilitation expenditures)

Large commercial (more than \$2 million in qualified rehabilitation expenditures)

State Historic Preservation Office Use Only

The State Historic Preservation Office has reviewed the PART 1 – HISTORIC SIGNIFICANCE for the above-named resource and hereby determines that the resource:

[ ] Appears to be a certified historic resource because the resource:

[ ] Is listed individually or is a contributing resource in a historic district listed in the National Register of Historic Places.

[ ] Is listed individually or is a contributing resource in a historic district listed in the State Register of Historic Sites.

[ ] Is a contributing resource in a 1970 PA 169, MCL 399.201 to 399.215 local historic district.

[ ] Preliminary Determination: Appears to meet the National Register Criteria for Evaluation for individual listing in the National Register of Historic Places. The listing process must be completed before the state Part 3 application is submitted.

[ ] Does not appear to be a certified historic resource.

Ryan M. Schumaker, State Historic Preservation Officer

Date



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7. Description of Physical Appearance (attach Continuation Sheet if needed)

Date of construction \_\_\_\_\_ Source(s) \_\_\_\_\_

Date(s) of additions and/or alterations \_\_\_\_\_

Has this resource been moved?  Yes  No If yes, when? \_\_\_\_\_

Use of resource prior to rehabilitation \_\_\_\_\_

8. Statement of Significance (attach Continuation Sheet if needed)