Pennsylvania Historical & Museum Commission

PROJECT REVIEW FORM

Request to Initiate SHPO Consultation on State and Federal Undertakings

SHPO USE ONLY	Reviewers: ____/____
DATE RECEIVED:	DATE DUE:
ER NUMBER:	HRSF: _____

REV: 06/2018

SECTION A: PROJECT NAME & LOCATION

Is this a new submittal? ◯ YES ◯ NO **OR** ◯ **This is additional information for ER Number:**

Project Name | County | Municipality

Project Address | City/State/ Zip

SECTION B: CONTACT INFORMATION & MAILING ADDRESS

Name | Phone

Company | Fax

Street/PO Box | Email

City/State/Zip

SECTION C: PROJECT DESCRIPTION

This project is located on: (check all that apply) ☐ Federal property ☐ State property ☐ Municipal property ☐ Private property

List all federal and state agencies and programs providing funds, permits, licenses.

Agency Type	Agency/Program/Permit Name	Project/Permit/Tracking Number (if applicable)
Federal	DCED-HUD	

Proposed Work – Attach project description, scope of work, site plans, and/or drawings

Project includes (check all that apply): ☐ Construction ☐ Demolition ☐ Rehabilitation ☐ Disposition

Total acres of project area: Total acres of earth disturbance:

Are there any buildings or structures within the project area? ◯ Yes ◯ No Approximate age of buildings:

Does this project involve properties listed in or eligible for the National Register of Historic Places, or designated as historic by a local government?	Yes	No	Unsure	Name of historic property or historic districts	
	◯	◯	◯		

Please print and mail completed form and all attachments to:

PHMC
State Historic Preservation Office
400 North St.
Commonwealth Keystone Building, 2nd Floor
Harrisburg, PA 17120-0093

Attachments – Please include the following information with this form

- ☐ **Map –** 7.5' USGS quad showing project boundary and Area of Potential Effect
- ☐ **Description/Scope –** Describe the project, including any ground disturbance and previous land use
- ☐ **Site Plans/Drawings –** Indicate past and present land use, location and dates of buildings, and proposed improvements
- ☐ **Photographs –** Attach prints or digital photographs showing the project site, including images of all buildings and structures keyed to a site plan

SHPO DETERMINATION (SHPO USE ONLY)

- ☐ There are **NO HISTORIC PROPERTIES** in the Area of Potential Effect
- ☐ The project will have **NO EFFECT** on historic properties
- ☐ The project will have **NO ADVERSE EFFECTS** on historic properties:
- ☐ The project will have **NO ADVERSE EFFECTS WITH CONDITIONS** (see attached)
- ☐ **SHPO REQUESTS ADDITIONAL INFORMATION** (see attached)

SHPO REVIEWER: _____ **DATE:** _____