



## Heritage Advisory Committee

### APPLICATION TO REGISTER A HERITAGE PROPERTY

**Name of Property:**

**Location:**

**District:**

**Present Owner:**

**Action Requested:**

#### **Evaluation Criteria:**

##### **1. Type of Structure:**

House                      Church                      Commercial  
Barn                         Cemetery  
Other (specify)

##### **2. (a) Age of Property:**

**(b) Source of Information:**

**(c) Condition of Structure:**

##### **3. (a) Style of Building: (see attached designs)**

Scottish, English, German & Irish Vernacular (1830 - 1880)  
Second Empire (1870 - 1900)  
Greek Revival (1830 - 1930)  
New England Colonial (1710 - 1840)  
Gothic Revival (1800 - 1890)  
The Four Square (1890 - 1930)  
Other (specify)

**(b) Photographs of Building/Property must be attached (maximum of 8)**

**(c) Type of Construction:**

Woodframe                      Brick                      Stone

**(c) Has there been any modifications to the original building? (Please specify)**

**4. Historical Association:**

**(a) individual (s)**

**(b) organization (s)**

**(c) Historic event(s)**

**(d) Is the Builder/Architect known?**      Yes      No

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

**5. Landmark:**

Do you or your association consider this property to be a landmark? Why?

**6. Additional Information**

Do you know of any source, i.e., book, report, newspaper article or individual(s) who has additional information about this property?

**7. Please include any additional information with respect to the historical significance of your property:**

**Application prepared by:**

**Address:**

**Email:**

**Phone:** Home \_\_\_\_\_ Work \_\_\_\_\_

**Date:**

**Signature(s):**

**Please return completed for to:**

Municipality of the County of Richmond  
P.O. Box 120  
Arichat, NS  
B0E 1A0

Phone: 226-2400 or 1-800-567-2600 (toll free)