

NATIONAL REGISTER OF HISTORIC RESOURCES PRELIMINARY SITE INFORMATION QUESTIONNAIRE

*The Antiquities, Monuments & Museums Corporation,
P. O. Box EE 15082, Nassau, N. P. , Bahamas*

*The questionnaire is intended to provide preliminary information about the property to
The Antiquities, Monuments & Museums Corporation*

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|---|---|
| 1. Name and Location of Property _____ _____ _____ | 2. Name and Address of Owner/Agent _____ _____ _____ |
| 3. Date of construction or significant historic association(s) _____ | |
| 4. Type of Property: <input type="checkbox"/> Archeological Site <input type="checkbox"/> Residential Building <input type="checkbox"/> Public Building <input type="checkbox"/> Commercial Building <input type="checkbox"/> Other (describe) | 5. Original use: _____ 6. Present Use: _____ |
| 7. Physical Description (Indicate basic design and construction and general condition at present time) | |
| 8. Why is property significant? | |
| 9. Enclosures: <input type="checkbox"/> current photos (original required) <input type="checkbox"/> historic photos (if available clear photocopies accepted) <input type="checkbox"/> location map | 10. Name and address of person submitting: _____ _____ |
| | 11. Telephone (daytime) _____ |

Date: _____

Signature: _____