Arizona SHPO

Historical In-Use Structure Forms

Beta Test Forms

July 2018

State Historic Preservation Office (SHPO)  |  1100 W. Washington St., Phoenix, AZ 85007  |  602-542-4009  |  AZStateParks.com/SHPO

“Managing and conserving Arizona’s natural, cultural and recreational resources for the benefit of the people, both in our parks and through our partners.”
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STATE OF ARIZONA

HISTORICAL IN-USE STRUCTURE INVENTORY

Structure Summary Form

Please type or print clearly. Fill out each applicable field accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets for specific structure types, and for additional comments and description.

State Historic Preservation Office (SHPO) | 1100 W. Washington St., Phoenix, AZ 85007 | 602-542-4009 | AZStateParks.com/SHPO

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<tr>
<th>Field No.</th>
<th>Former Site Number</th>
<th>AZSITE Inventory No.</th>
<th>ASM Accession No.</th>
<th>Other Project Nos. (if applicable)</th>
</tr>
</thead>
</table>

STRUCTURE IDENTIFICATION

Structure Type: ____________________________________________________________
(Identify structure type from the Field Guide on In-Use Structures)

Historic Name(s): ____________________________________________________________
(Enter the name(s) if any, which best reflects the property’s historic importance)

Use/Function:
Describe how the property has been used over time, beginning with the original use if known.
________________________________________________________________________
________________________________________________________________________

Constructed by: ____________________  ☐ known  ☐ not determined

Construction Date: ________________  ☐ known  ☐ estimated

Source(s)/Reference(s): ______________________________________________________

Total Number of linear segments documented in the project area / APE: __________________________

LOCATIONAL INFORMATION

(For linear segment[s] recorded in the project area, please include start and end UTM points)

USGS 7.5’ map __________________________

UTM reference (NAD 83): Zone ___  Easting _________  Northing __________

UTM reference (NAD 83): Zone ___  Easting _________  Northing __________

Jurisdiction: _______________________________________________________________
(e.g., private, municipal, county, state, federal)

Owner Class: ___________________________  (e.g., residential, commercial)

STRUCTURAL CONDITION

☐ Good (well maintained, no serious problems apparent)
☐ Fair (some problems apparent)
☐ Poor (major problems; imminent threat)

Continuation Form(s) Used? _________  Map included on continuation form?  (Y/N) _____________
STATE OF ARIZONA  HISTORICAL IN-USE STRUCTURE INVENTORY
Structure Summary Form

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Field No. __________  Former Site Number _______________  AZSITE Inventory No. _______
ASM Accession No ___________  Other Project Nos. (if applicable) ____________

PHOTOGRAPH

Date of Photo: _________
Direction: __________
Source / Photo No.: __________

ADDITIONAL COMMENTS
(Use supplemental continuation form if warranted):

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

FORM(S) COMPLETED BY:
Name: __________________________________________
Date: __________________________________________________________________________
Affiliation: __________________________________________
Mailing Address: __________________________________________
Phone No.: __________________________________________
STATE OF ARIZONA  
HISTORICAL IN-USE STRUCTURE INVENTORY
Structure Summary Form

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Field No. _________ Former Site Number _______________ AZSITE Inventory No. _______
ASM Accession No ___________ Other Project Nos. (if applicable) ____________

SIGNIFICANCE
A property need only be significant under one of the areas below to be eligible for the National Register.

☐ A  Historic Events/Trends
☐ B  Person
☐ C  Architecture
☐ D  Information Potential

Historic Context Statement:
(Summarize local historic contexts relevant to the region and resource [Period of Significance, Place, and Theme]).

____________________________________________________________________________________

____________________________________________________________________________________

INTEGRITY
To be eligible for the National Register, a property must have integrity, that is, it must be able to visually convey its importance. Provide detailed information on a continuation form about aspects of integrity that apply to the structure.

☐ Location, ☐ Design, ☐ Setting, ☐ Materials, ☐ Workmanship, ☐ Feeling, ☐ Association

Notes: ____________________________________________________________

NATIONAL REGISTER STATUS (if listed, check the appropriate box)

☐ Individually listed  ☐ Contributor  ☐ Non-Contributor to __________________Historic District

Date Listed ____________

RECOMMENDATIONS OF ELIGIBILITY
(By consultant/recorder - note if there is previous determination/concurrence by SHPO)

Property ☐ is ☐ is not  eligible individually.
Property ☐ is ☐ is not  eligible as a contributor

☐ More information needed to evaluate
Justification: ______________________________________________________

AGENCY RECOMMENDATION/DETERMINATION

Property ☐ is ☐ is not  eligible individually.
Property ☐ is ☐ is not  eligible as a contributor.

SHPO RESPONSE (to be completed by SHPO staff)

Property ☐ is ☐ is not  eligible individually.
Property ☐ is ☐ is not  eligible as a contributor.

☐ More information need to evaluate
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Continuation Form:
Non-Linear Structures (General / Miscellaneous)

Some nonlinear structures may be exempted from documentation using the structure forms.

See Field Guide for an inventory of these excluded structures
STATE OF ARIZONA

HISTORICAL IN-USE STRUCTURE Continuation Form
Non-Linear Structures
General/Miscellaneous

Field No. ______________ Former Site Number ______________ AZSITE Inventory No. ______
ASM Accession No __________ Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION

Structure Type: ________________________________________________________________
Construction Materials: _________________________________________________________
Alterations: __________________________________________________________________

Rectilinear Structures

<table>
<thead>
<tr>
<th>Feature</th>
<th>Length (ft.)</th>
<th>Width (ft.)</th>
<th>Depth (ft.)</th>
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Circular Structures

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<tr>
<th>Feature</th>
<th>Max Diameter (ft.)</th>
<th>Min Diameter (ft.)</th>
<th>Depth (ft.)</th>
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ASSOCIATED FEATURES

List all associated features and note whether they contribute, or not, to the eligibility of the primary structure. Include photographs if warranted.

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<th>Feature No.</th>
<th>Feature Type</th>
<th>Eligibility Status¹</th>
<th>Length² (ft.)</th>
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¹Contributor or Non-contributor to the eligibility of the primary structure
²Recorded portions in Project Area/APE only
³Brief description if necessary. Include corresponding figure number if photographs are on attached continuation sheet(s)

ADDITIONAL COMMENTS

Document distinctive attributes, such as inscriptions, markings, metal tags, etc.:_____________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

AGENCY REVIEW AND APPROVAL

NAME __________________________ AGENCY __________________________ DATE ______________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)

NAME __________________________ DATE __________________________
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Continuation Form:
Non-Linear Structures (Bridges / Trestles)

Many ADOT bridges have been documented previously by FRASERDesign (2008) and may not require the use of structure forms.

See Field Guide for additional information and protocols for recording ADOT bridges
STATE OF ARIZONA
HISTORICAL IN-USE STRUCTURE Continuation Form
Non-Linear Structures
Bridges/Trestles

Please type or print clearly. Fill out each applicable field accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. ____________    Former Site Number ________________    AZSITE Inventory No. ______
ASM Accession No. ________    Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION

Bridge / Trestle Type: ________________________________________________
(e.g., slab & girder, arch, box culvert, suspension, cable, and truss)
Construction Material(s): ________________________________________________
(see Field Guide for list of standard material types)
Substructure Characteristics: ____________________________________________
(e.g., abutments, wing walls, piers, girders)
Additional features: _____________________________________________________
(e.g., guardrails)
Alterations: ____________________________________________________________

Span Number: ______________
Span Length (ft.): ______________
Total Length (ft.): ______________
Roadbed Width (ft.): ______________
Total Width (ft.): ______________
(Note if estimated)

ADDITIONAL COMMENTS

Document distinctive attributes, such as inscriptions, markings, metal tags, etc.:
________________________________________________________________________
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AGENCY REVIEW AND APPROVAL
NAME __________________   AGENCY ___________________   DATE ____________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)
NAME ___________________   DATE ___________________
Continuation Form:
Linear Structures (Highways / Roads / Trails)

Excludes the bulk of the Interstate Highway System

Frontage roads may be recorded, if research indicates they were once a component of the Arizona HSHS

Municipal and County arterial streets are excluded

Historic contexts must provide justification for this exclusion

Some arterial roads may have been components of the Arizona HSHS and should be recorded on forms
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STATE OF ARIZONA
HISTORICAL IN-USE STRUCTURE Continuation Form
Linear Structures
Highways/Roads/Trails

Please type or print clearly. Fill out each applicable field accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. ___________ Former Site Number _______________ AZSITE Inventory No. _______
ASM Accession No _______ Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION
(Recorded segments only)

Segment Number: __________ Road Structure Type: ________________________________
(e.g., trail, wagon road, automobile road or highway)

Road Treatment (paved, improved, and unimproved): ________________________________

Construction Materials: _________________________________________________________

Alterations: __________________________________________________________________

Length (ft.): __________ Roadbed Width (ft.): __________ Road Prism (ft.): __________
(Road prism includes shoulders, berms, crown ditches, and other physical components of a roadway)

Right-of-Way (ROW) width (ft.): Current ROW: ___________ Historical ROW (if known): ___________

ASSOCIATED FEATURES
List all associated features and note whether they contribute, or not, to the eligibility of the primary structure. Include representative photographs. Please Note: Bridges may be regarded as associated features; however, they should be documented separately as non-linear structures.

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²Recorded portions in Project Area/APE only
³Brief description if necessary. Include corresponding figure number if photographs are on attached continuation sheet(s)

ADDITIONAL COMMENTS
Document distinctive attributes, such as inscriptions, markings, metal tags, etc.:
_________________________________________________________________________________
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AGENCY REVIEW AND APPROVAL
NAME __________________ AGENCY __________________ DATE _____________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)
NAME __________________ DATE ___________________________

July 2018, Beta Test
Continuation Form:
Linear Structures (Transmission / Utility Lines)

Excludes 12kV and 69kv lines in urban settings

Historic contexts must provide justification for this exclusion

Excludes transmission lines that are listed on the NRHP or have been documented under HABS/HAER standards

Please note that not all components of listed transmission line systems are included in NRHP nominations or HABS/HAER documentation.

See Field Guide for additional information and protocols for recording Transmission / Utility Lines
Please type or print clearly. Fill out each applicable field accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. _________ Former Site Number _____________ AZSITE Inventory No. _______ ASM Accession No ___________ Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION
(Recorded segments only)

Segment Number: __________
Transmission Type: ________________________
(e.g., telephone, distribution [12kV], Subtransmission [69kV], Transmission [110kV and greater])
Transmission/Utility Type: ________________________
(Monopole, H-pole, Tri-pole, Four-pole, Steel Structures/Towers—see Field Guide for details on nomenclature and types)
Construction Materials: _______________ Cross-Arms (Number of cross-arms): ____________
Alterations: __________________________________________________________________

Length (recorded segment[s]) (ft.) (Use continuation sheet for multiple recorded segments): ____________
Number of poles in recorded segment and pole numbers (if known): __________________________________________________________________
Estimated Height of Poles (ft.): ____________ Diameter/Width of Poles (ft.): ____________
Insulator type(s): ________________________
(Unipart/Multipart Glass or Ceramic, Ceramic suspension, Glass suspension, Composite)
Direction of Line and Overall Distance (if known or applicable): __________________________________________________________________

ASSOCIATED FEATURES
List all associated features and note whether they contribute, or not, to the eligibility of the primary structure. Include photographs if warranted. Please note: Substations may be regarded as associated features of a transmission line. However, they should be documented separately as non-linear structures.

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AGENCY REVIEW AND APPROVAL
NAME ___________________ AGENCY ___________________ DATE _____________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)
NAME ___________________ DATE ___________________

July 2018, Beta Test
Continuation Form:

*Linear Structures (Railroads)*
STATE OF ARIZONA
HISTORICAL IN-USE STRUCTURE Continuation Form
Linear Structures
Railroads

Please type or print clearly. Fill out each applicable field accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. _______ Former Site Number ______________ AZSITE Inventory No. ______
ASM Accession No ______ Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION
(Recorded segments only)
Segment Number: ______ Railroad Structure Type: ________________________________
(e.g., Transcontinental mainline [single, double], branch line, unknown)
Railroad Gauge (i.e., Standard, Narrow [U.S.], other): ______________________________
Track Work Present: _____________________________________________________________
(e.g., mainline track only, siding [with switch and junction], wye, railroad yard or station)
Ballast Materials (if present): ________________ Ballast / Bed Width (ft.): ________________
Alterations: _________________________________
Length (ft.): ________________________________
(Use supplemental continuation sheet for multiple recorded segments)

ASSOCIATED FEATURES
List all associated features and note whether they contribute, or not, to the eligibility of the primary structure. Include photographs if warranted.
Please Note: Trestles, adjacent yards and stations, water tank structures, and parallel utility lines may be regarded as associated features to a railroad structure. However, these structures should be documented separately as non-linear structures, linear structures, and/or building structures.

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ADDITIONAL COMMENTS
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AGENCY REVIEW AND APPROVAL
NAME ___________________ AGENCY ___________________ DATE ____________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)
NAME ___________________ DATE ___________________
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Continuation Form:

Linear Structures (Canals / Laterals)

Excludes certain irrigation system components maintained by Reclamation

See Field Guide for specific components that are excluded
STATE OF ARIZONA

HISTORICAL IN-USE STRUCTURE Continuation Form

Linear Structures

Canals/Laterals

Please type or print clearly. Fill out each applicable space accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. ____________  Former Site Number ____________  AZSITE Inventory No. ________
ASM Accession No ____________  Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION
(Recorded segments only)

Segment Number: ____________  Irrigation Structure Type: ____________________________________
(e.g., Main Canal, Distribution Lateral, Irrigation Lateral, Unknown)

Associated System: _______________________________________________________________
(Reclamation project or Independent Irrigation District or System)

Associated Main Canal (if applicable): ______________________________________________
(e.g., Earthen, Gunite-Lined, Concrete-Lined)

Construction Materials: ___________________________________________________________

Alterations: ______________________________________________________________________

Length (ft.): ________________  Depth (ft.): ____________  Width of Channel (ft.): ____________
(Use supplemental continuation sheet for multiple recorded segments)

Total Width (ft.) (including berms, access roads; note if estimated): ______________________

ASSOCIATED FEATURES
List all associated features and note whether they contribute or do not contribute, to the eligibility of the primary structure. Include photographs if warranted. Please note: adjacent wells, gauging stations, and other prominent structures (e.g., flumes) may be regarded as associated features of a canal. However, they should be documented separately as non-linear or linear structures.

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ADDITIONAL COMMENTS
Document distinctive attributes, as well as inscriptions, markings, metal tags, etc.: ____________________________

________________________________________________________________________________

AGENCY REVIEW AND APPROVAL

NAME ______________________  AGENCY __________________________  DATE __________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)

NAME __________________________________  DATE ________________________

July 2018, Beta Test
Continuation Form:
Linear Structures (Other)
STATE OF ARIZONA
HISTORICAL IN-USE STRUCTURE Continuation Form
Linear Structures
Other

Please type or print clearly. Fill out each applicable space accurately and with as much information as is known about the property. Modify fields as needed. Use continuation sheets where necessary, particularly for additional comments and description.

Field No. __________  Former Site Number ____________  AZSITE Inventory No. ______
ASM Accession No ______   Other Project Nos. (if applicable) ________________

STRUCTURE IDENTIFICATION, DIMENSIONS AND CONSTRUCTION
(Recorded segments only)
Segment Number: _______  Structure Type: ___________________________
Construction Materials: ____________________________________________
Alterations: ______________________________________________________
Length (ft.): __________  Depth (ft.): __________  Total Width (ft.): __________
(Use supplemental continuation sheet for multiple recorded segments)

ASSOCIATED FEATURES
List all associated features and note whether they contribute, or not, to the eligibility of the primary structure (example table below). Include photographs if warranted.

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AGENCY REVIEW AND APPROVAL
NAME ___________________ AGENCY ___________________ DATE ____________

SHPO REVIEW and APPROVAL (to be signed by SHPO staff)
NAME ___________________ DATE ___________________

July 2018, Beta Test
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Continuation Form:
Supplemental Information
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