Rev. 11/11/18

**STATE OF DELAWARE**

**HISTORIC PRESERVATION TAX CREDIT APPLICATION**

**AMENDMENT FORM**

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 **OFFICE USE ONLY**

**Instructions:** Use this form to provide additional information for a project placed on hold or to amend an approved Part 2 or Part 3 Application. .

**This form** □ Includes additional information requested for an application currently on hold

 □ Amends a previously approved □ Part 2, or □ Part 3 Application

Categories of work discussed in this amendment include:

**Describe Nature of Work; add Continuation Sheet, if necessary**

Name: Signature: Date:

Organization (if applicable):

Address: City: State: Zip:

Telephone Number: E-mail:

**OFFICE USE ONLY:**

The Delaware State Historic Preservation Office has determined that the rehabilitation work described in this amendment

□ is consistent with the *Secretary of the Interior’s Standards and Guidelines for Rehabilitation*.

□ will be consistent with the *Secretary of the Interior’s Standards and Guidelines for Rehabilitation* if the attached conditions are met.

□ are not consistent with the *Secretary of the Interior’s Standards and Guidelines for Rehabilitation*.

Certified by: \_\_\_\_\_\_\_\_\_\_

 Timothy A. Slavin, Delaware State Historic Preservation Officer Date