

STATE OF DELAWARE
HISTORIC PRESERVATION TAX CREDIT APPLICATION
AMENDMENT FORM

Property Address _____

Project Number: _____

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: _____
Suzanne Savery, Delaware State Historic Preservation Officer

_____ Date

