

NOTICE OF INTENT FORM  
OF  
PUBLIC CONSTRUCTION, PUBLIC IMPROVEMENT, OR  
TRANSFER OF PUBLIC PROPERTY TO PRIVATE OWNERSHIP

**Buildings and Structures**

Forwarding of this completed form to the Historic Preservation Division of MDAH constitutes a request for an assessment of impacts to designated or potential Mississippi Landmarks in accordance with the Antiquities Law of Mississippi (Miss. Code. Ann. § 39-7- 1 et seq.).

Property Owner \_\_\_\_\_ County of project \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone(s) \_\_\_\_\_ / \_\_\_\_\_

Title/Position \_\_\_\_\_

Email Address \_\_\_\_\_

Contact Person's Address (if different from owner)

Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Signature of applicant/contact person requesting this assessment \_\_\_\_\_

Date \_\_\_\_\_

Name and address of structure: \_\_\_\_\_

ORIGINAL LOCATION  MOVED

Is the affected structure a designated Mississippi Landmark? YES  NO

Who owns the building? PUBLIC  PRIVATE

What year was the building built, if known? \_\_\_\_\_

Describe the present use and condition of the property:

\_\_\_\_\_  
\_\_\_\_\_

Attach a **street map**, indicating the precise location of the subject property. If project also involves a tract of land, indicate the number of acres.

Approximate number of acres: \_\_\_\_\_

Briefly describe the project scope of work:

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Has this project been previously submitted for review?  
If **YES**, enclose a copy of this office's prior comments.

YES  NO

Has any work related to this project been completed or is in progress  
prior to submittal of the *Notice of Intent*?

YES  NO

**Other Attachments:**

- **Photographs of the building and specific areas of work**
- **Plans, specifications and/or a detailed scope of work for the project**
- **Legal description of the property if it is not a designated Mississippi Landmark**

**MAIL COMPLETED FORM AND ATTACHMENTS TO:**

Mississippi Landmark Administrator  
Historic Preservation Division  
Mississippi Department of Archives and History  
P.O. Box 571  
Jackson, Mississippi 39205-0571

**FOR FURTHER INFORMATION:**

Phone: (601) 576-6940  
Fax: (601) 576-6955