



# NOTICE OF COMPLETION FOR PERMITTED PROJECTS

Completion and submittal of this form to the Historic Preservation Division of MDAH is in compliance with polices and procedures adopted by the Board of Trustees of the Mississippi Department of Archives and History and is in accordance with the State Antiquities Law (Miss. Code. Ann. § 39-7- 1 et seq.).

Permittee \_\_\_\_\_ County of project \_\_\_\_\_

Permittee's address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

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

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

Contact Person's Address (if different from permittee)

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

Signature of permittee/contact person \_\_\_\_\_ email: \_\_\_\_\_

DATE \_\_\_\_\_ MDAH Project # \_\_\_\_\_

## Buildings and Structures (ONLY)

Did the project involve an addition to, destruction, alteration, or renovation of any structure? YES  NO

Name and/or address of structure(s): \_\_\_\_\_  
\_\_\_\_\_

Briefly describe the project scope of work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has all work related to this project been completed? YES  NO

Is there any additional work in progress that has not been completed? YES  NO

Is there any work planned for the same property in the immediate future? YES  NO

Briefly Describe any work that is in progress or planned for the immediate future: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were there any project components outside the anticipated scope of work and/or discoveries during the project?

YES  NO

*(If so, please attach any reports and/or photographs produced regarding discoveries found during project)*

**The Notice of Completion must include photo(s) of the subject property in its current or "AFTER" condition and/or permitted project components as completed. Use of printed digital images are acceptable if clear.**

**Ground Disturbing Activity / Archaeology (ONLY)**

Did the project involve grading, trenching, use of fill material or any other ground disturbing activity?

YES  NO

Briefly Describe the project scope of work. \_\_\_\_\_

\_\_\_\_\_

Was a cultural resources/archaeological survey conducted for this site? If YES, name the archaeologist and date of report(s).

YES  NO

\_\_\_\_\_

Has the work related to this project been completed?

YES  NO

Is there any additional work in progress that has not been completed?

YES  NO

Is there any work planned for the property in the immediate future?

YES  NO

Briefly Describe any work that is in progress or planned for the immediate future: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please include photo(s) of the subject property in its current or "AFTER" condition. Use of printed digital images are acceptable if clear.**

**MAIL COMPLETED FORM AND ATTACHMENTS TO:**

Mississippi Landmark Program Coordinator  
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