

1306574406

44-657

MD. HISTORICAL TRUST NATIONAL REGISTER OF HISTORIC PLACES
BOX 1704 ANNAPOLIS, MD. 21404
INVENTORY - NOMINATION FORM
(Type all entries - complete applicable sections)

STATE:	
COUNTY:	
FOR NPS USE ONLY	
ENTRY NUMBER	DATE

1. NAME

COMMON: Powers- Bond Barn

AND/OR HISTORIC:

2. LOCATION

STREET AND NUMBER: Lane enters west of Paddrick Road about 100 yards

CITY OR TOWN: near Dublin

STATE: Maryland CODE: COUNTY: Harford CODE: Road

3. CLASSIFICATION

CATEGORY (Check One)	OWNERSHIP	STATUS	ACCESSIBLE TO THE PUBLIC
District <input type="checkbox"/> <u>Building</u> <input type="checkbox"/>	Public <input type="checkbox"/>	Occupied <input type="checkbox"/>	Yes: <u>Restricted</u> <input type="checkbox"/>
Site <input type="checkbox"/> <u>Structure</u> <input type="checkbox"/>	<u>Private</u> <input type="checkbox"/>	<u>Unoccupied</u> <input type="checkbox"/>	Unrestricted <input type="checkbox"/>
Object <input type="checkbox"/>	Both <input type="checkbox"/>	Being Considered <input type="checkbox"/>	No: <input type="checkbox"/>
PRESENT USE (Check One or More as Appropriate)			
<u>Agricultural</u> <input type="checkbox"/>	Government <input type="checkbox"/>	Park <input type="checkbox"/>	Transportation <input type="checkbox"/>
Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>	Private Residence <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>
Educational <input type="checkbox"/>	Military <input type="checkbox"/>	Religious <input type="checkbox"/>	
Entertainment <input type="checkbox"/>	Museum <input type="checkbox"/>	Scientific <input type="checkbox"/>	

4. OWNER OF PROPERTY

OWNERS NAME: Walter and Nealia Powers

STREET AND NUMBER: Franklin Church Road & Paddrick Road

CITY OR TOWN: near Dublin STATE: Maryland CODE:

5. LOCATION OF LEGAL DESCRIPTION

COURTHOUSE, REGISTRY OF DEEDS, ETC:

STREET AND NUMBER:

CITY OR TOWN: STATE: CODE:

APPROXIMATE ACREAGE OF NOMINATED PROPERTY:

6. REPRESENTATION IN EXISTING SURVEYS

TITLE OF SURVEY:

DATE OF SURVEY: Federal State County Local

DEPOSITORY FOR SURVEY RECORDS:

STREET AND NUMBER:

CITY OR TOWN: STATE: CODE:

SEE INSTRUCTIONS

STATE: COUNTY: ENTRY NUMBER: DATE: FOR NPS USE ONLY

111-657

7. DESCRIPTION

CONDITION	(Check One)					
	Excellent <input type="checkbox"/>	Good <input checked="" type="checkbox"/>	Fair <input type="checkbox"/>	Deteriorated <input type="checkbox"/>	Ruins <input type="checkbox"/>	Unexposed <input type="checkbox"/>
INTEGRITY	(Check One)			(Check One)		
	Altered <input type="checkbox"/>	Unaltered <input checked="" type="checkbox"/>		Moved <input type="checkbox"/>	Original Site <input checked="" type="checkbox"/>	

DESCRIBE THE PRESENT AND ORIGINAL (if known) PHYSICAL APPEARANCE

Small bank barn on stone foundation,
 the barnyard facing south, oblong, the
 pitch roof ridgetime running east-west.
 Heavy timbers are covered with vertical siding.

SEE INSTRUCTIONS

114-657

8. SIGNIFICANCE

PERIOD (Check One or More as Appropriate)

Pre-Columbian <input type="checkbox"/>	16th Century <input type="checkbox"/>	18th Century <input checked="" type="checkbox"/>	20th Century <input type="checkbox"/>
15th Century <input type="checkbox"/>	17th Century <input type="checkbox"/>	19th Century <input type="checkbox"/>	

SPECIFIC DATE(S) (If Applicable and Known)

AREAS OF SIGNIFICANCE (Check One or More as Appropriate)

Aboriginal <input type="checkbox"/>	Education <input type="checkbox"/>	Political <input type="checkbox"/>	Urban Planning <input type="checkbox"/>
Prehistoric <input type="checkbox"/>	Engineering <input type="checkbox"/>	Religion/Philosophy <input type="checkbox"/>	Other (Specify) <input type="checkbox"/>
Historic <input type="checkbox"/>	Industry <input type="checkbox"/>	Science <input type="checkbox"/>	_____
<u>Agriculture</u> <input type="checkbox"/>	Invention <input type="checkbox"/>	Sculpture <input type="checkbox"/>	_____
Art <input type="checkbox"/>	Landscape <input type="checkbox"/>	<u>Social/Humanitarian</u> <input type="checkbox"/>	_____
Commerce <input type="checkbox"/>	Architecture <input type="checkbox"/>	Literature <input type="checkbox"/>	_____
Communications <input type="checkbox"/>	Literature <input type="checkbox"/>	Military <input type="checkbox"/>	_____
Conservation <input type="checkbox"/>	Military <input type="checkbox"/>	Music <input type="checkbox"/>	_____
	Music <input type="checkbox"/>	Theater <input type="checkbox"/>	_____
		Transportation <input type="checkbox"/>	_____

STATEMENT OF SIGNIFICANCE (Include Personages, Dates, Events, Etc.)

Small barn, built use since around
 1900s income is mostly from non-farm activity.

SEE INSTRUCTIONS

1711-657

9. MAJOR BIBLIOGRAPHICAL REFERENCES

Interview with Mr & Mrs Parris at site, 28 Jan 71
by J. E. Bull.

10. GEOGRAPHICAL DATA

LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY			O R	LATITUDE AND LONGITUDE COORDINATES DEFINING THE CENTER POINT OF A PROPERTY OF LESS THAN ONE ACRE		
CORNER	LATITUDE	LONGITUDE		LATITUDE	LONGITUDE	
	Degrees Minutes Seconds	Degrees Minutes Seconds		Degrees Minutes Seconds	Degrees Minutes Seconds	
NW	° ' "	° ' "		° ' "	° ' "	
NE	° ' "	° ' "		° ' "	° ' "	
SE	° ' "	° ' "		° ' "	° ' "	
SW	° ' "	° ' "		° ' "	° ' "	

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

STATE:	CODE	COUNTY	CODE

11. FORM PREPARED BY

NAME AND TITLE: JE Bull, Harlan Committee

ORGANIZATION: _____ DATE: _____

STREET AND NUMBER: Box 1704

CITY OR TOWN: _____ STATE: _____ CODE: _____

12. STATE LIAISON OFFICER CERTIFICATION

As the designated State Liaison Officer for the National Historic Preservation Act of 1966 (Public Law 89-665), I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service. The recommended level of significance of this nomination is:

National State Local

Name _____

Title _____

Date _____

NATIONAL REGISTER VERIFICATION

I hereby certify that this property is included in the National Register.

Chief, Office of Archeology and Historic Preservation

Date _____

ATTEST:

Keeper of The National Register

Date _____

SEE INSTRUCTIONS