

HA 746

MD. HISTORICAL TRUST NATIONAL REGISTER OF HISTORIC PLACES
BOX 1704 INVENTORY - NOMINATION FORM
ANNAPOLIS, MD. 21404

STATE:	
COUNTY:	
FOR NPS USE ONLY	
ENTRY NUMBER	DATE

(Type all entries - complete applicable sections)

1. NAME

COMMON: Tom Beavers' milk house

AND/OR HISTORIC:

2. LOCATION

STREET AND NUMBER: South side of Chapel Road about 0.4 mi east

CITY OR TOWN: near Home of Grace rd Paradise Road (Md 462)

STATE: Md CODE: COUNTY: Harford CODE:

3. CLASSIFICATION

CATEGORY (Check One)	OWNERSHIP	STATUS	ACCESSIBLE TO THE PUBLIC
District <input type="checkbox"/> Building <input checked="" type="checkbox"/>	Public <input type="checkbox"/>	Occupied <input type="checkbox"/>	Yes: <input type="checkbox"/>
Site <input type="checkbox"/> Structure <input checked="" type="checkbox"/>	Private <input checked="" type="checkbox"/>	In Process <input type="checkbox"/> Unoccupied <input checked="" type="checkbox"/>	Restricted <input checked="" type="checkbox"/>
Object <input type="checkbox"/>	Both <input type="checkbox"/>	Being Considered <input type="checkbox"/>	Unrestricted <input type="checkbox"/>
PRESENT USE (Check One or More as Appropriate)			
Agricultural <input type="checkbox"/>	Government <input type="checkbox"/>	Park <input type="checkbox"/>	Transportation <input type="checkbox"/> Comments <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"/>	Homehold Utility
Entertainment <input type="checkbox"/>	Museum <input type="checkbox"/>	Scientific <input type="checkbox"/>	

4. OWNER OF PROPERTY

OWNERS NAME: Tom Beavers

STREET AND NUMBER: Chapel Road

CITY OR TOWN: Home of Grace RTD STATE: Md CODE:

5. LOCATION OF LEGAL DESCRIPTION

COURTHOUSE, REGISTRY OF DEEDS, ETC: HARFORD COUNTY CLERK'S OFFICE

STREET AND NUMBER: 40 S. MAIN

CITY OR TOWN: BEL AIR STATE: MARYLAND CODE:

ACREAGE 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:

STATE:

COUNTY:

FOR NPS USE ONLY

ENTRY NUMBER

DATE

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

Stone foundations under a frame building covered with board and batten under a peaked roof. About 16' x 20', there are louvers protecting the windows of the ^{lower} room ~~room~~, entered from the north, where troughs held cooling water for the dairy products of the family farm. The upper room, ~~was always~~ the tool house, is entered from the east.

8. SIGNIFICANCE

PERIOD (Check One or More as Appropriate)

- Pre-Columbian 16th Century 18th Century 20th Century
 15th Century 17th Century 19th Century

SPECIFIC DATE(S) (If Applicable and Known)

AREAS OF SIGNIFICANCE (Check One or More as Appropriate)

- | | | | | | | |
|----------------|--------------|--------------------------|----------------|--------------------------|-----------------|--------------------------|
| Aboriginal | Education | <input type="checkbox"/> | Political | <input type="checkbox"/> | Urban Planning | <input type="checkbox"/> |
| Prehistoric | Engineering | <input type="checkbox"/> | Religion/Phi- | | Other (Specify) | <input type="checkbox"/> |
| Historic | Industry | <input type="checkbox"/> | losophy | <input type="checkbox"/> | | |
| Agriculture | Invention | <input type="checkbox"/> | Science | <input type="checkbox"/> | | <u>Household</u> |
| Art | Landscape | | Sculpture | <input type="checkbox"/> | | <u>utility</u> |
| Commerce | Architecture | <input type="checkbox"/> | Social/Human- | | | |
| Communications | Literature | <input type="checkbox"/> | itarian | <input type="checkbox"/> | | |
| Conservation | Military | <input type="checkbox"/> | Theater | <input type="checkbox"/> | | |
| Architecture | Music | <input type="checkbox"/> | Transportation | <input type="checkbox"/> | | |

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

This little outbuilding served as a shelter for the troughs filled with cool, well water that preserved the milk supply for a number of hours before the days of refrigeration.

9. MAJOR BIBLIOGRAPHICAL REFERENCES

[Empty space for major bibliographical references]

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: _____

ORGANIZATION: MARYLAND HISTORICAL TRUST DATE: _____

STREET AND NUMBER: _____

CITY OR TOWN: ANNAPOLIS STATE: MARYLAND CODE: _____

12. STATE LIAISON OFFICER CERTIFICATION

NATIONAL REGISTER VERIFICATION

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 _____

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 _____