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Form 10-300
(Dec. 1968)

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

N. R. FIELD SHEET

STATE:	
COUNTY:	
FOR NPS USE ONLY	
ENTRY NUMBER	DATE

NATIONAL REGISTER OF HISTORIC PLACES INVENTORY – NOMINATION FORM

MD. HISTORICAL TRUST
BOX 1704
ANNAPOLIS, MD. 21404

(Type all entries – complete applicable sections)

1. NAME

COMMON: Harry C. Mitchell Springhouse

AND/OR HISTORIC:

2. LOCATION

STREET AND NUMBER: Chapel Road

CITY OR TOWN:

STATE: Maryland | CODE: | COUNTY: HARFORD | CODE:

3. CLASSIFICATION

CATEGORY (Check One)	OWNERSHIP		STATUS	ACCESSIBLE TO THE PUBLIC
District ☐ Building ☐	Public ☐	Public Acquisition:	Occupied ☐	Yes:
Site ☐ Structure ☑	Private ☐	In Process ☐	Unoccupied ☐	Restricted ☐
Object ☐	Both ☐	Being Considered ☐	Preservation work in progress ☐	Unrestricted ☐
				No: ☐

PRESENT USE *(Check One or More as Appropriate)*

Agricultural	☐	Government	☐	Park	☐	Transportation	☐	Comments	☐
Commercial	☐	Industrial	☐	Private Residence	☐	Other *(Specify)*	☐		
Educational	☐	Military	☐	Religious	☐				
Entertainment	☐	Museum	☐	Scientific	☐	Household Utility			

4. OWNER OF PROPERTY

OWNERS NAME: Harry C. Mitchell

STREET AND NUMBER: Chapel Road

CITY OR TOWN: | STATE: Maryland | CODE:

5. LOCATION OF LEGAL DESCRIPTION

COURTHOUSE, REGISTRY OF DEEDS, ETC: CLERK OF THE CIRCUIT COURT

STREET AND NUMBER: HARFORD COUNTY COURTHOUSE 45 S. MAI

CITY OR TOWN: DEL 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

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7. DESCRIPTION

CONDITION	(Check One) Excellent ☐	Good ☐	Fair ☐	Deteriorated ☐	Ruins ☐	Unexposed ☐
INTEGRITY	(Check One) Altered ☐	Unaltered ☐		(Check One) Moved ☐	Original Site ☐	

DESCRIBE THE PRESENT AND ORIGINAL (*If known*) PHYSICAL APPEARANCE

Stone springhouse, about 20' x 16', sheltering a fine spring about 200 yards southeast of the Mitchell house. The stream flows out to the east. The door is to the west. The lip roof has a louvered dovecote.

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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 ☐	Political ☐	Urban Planning ☐
Prehistoric ☐	Engineering ☐	Religion/Philosophy ☐	Other *(Specify)* ☐
Historic ☐	Industry ☐	Science ☐	Household utility.
Agriculture ☐	Invention ☐	Sculpture ☐	
Art ☐	Landscape Architecture ☐	Social/Humanitarian ☐	
Commerce ☐	Literature ☐	Theater ☐	
Communications ☐	Military ☐	Transportation ☐	
Conservation ☐	Music ☐		
Architecture ☐			

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

Substantial and beautifully proportioned simple utility building for a country estate. The family milk supply was cooled here, cream skimmed and butter churned for the household.

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9. MAJOR BIBLIOGRAPHICAL REFERENCES

10. GEOGRAPHICAL DATA

LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY						OR	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
STATE:	CODE	COUNTY:	CODE
STATE:	CODE	COUNTY:	CODE
STATE:	CODE	COUNTY:	CODE

11. FORM PREPARED BY

NAME AND TITLE:

ORGANIZATION | DATE

STREET AND NUMBER:

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 _____