

308604205
N. R. FIELD SHEET

HA 860

NATIONAL HISTORICAL TRUST
1704
POLIS, MD. 21404

NATIONAL REGISTER OF HISTORIC PLACES
INVENTORY - NOMINATION FORM

(Type all entries - complete applicable sections)

STATE:	
COUNTY:	
FOR NPS USE ONLY	
ENTRY NUMBER	DATE

1. NAME

COMMON: *Rose Hill out house #2*

AND/OR HISTORIC:

2. LOCATION

STREET AND NUMBER: *Lane enters south of Abingdon Road about 0.3 mi*

CITY OR TOWN: *Abingdon east of Phila. Road (Md. 7)*

STATE: *Md* CODE: COUNTY: *Harford* CODE:

3. CLASSIFICATION

CATEGORY (Check One)	OWNERSHIP	STATUS	ACCESSIBLE TO THE PUBLIC
District <input type="checkbox"/> Building <input type="checkbox"/>	Public <input type="checkbox"/>	Occupied <input type="checkbox"/> Yes	Restricted <input type="checkbox"/>
Site <input type="checkbox"/> Structure <input checked="" type="checkbox"/>	Private <input type="checkbox"/>	Unoccupied <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)			
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"/>	<i>vacant slave quarters</i>
Entertainment <input type="checkbox"/>	Museum <input type="checkbox"/>	Scientific <input type="checkbox"/>	

4. OWNER OF PROPERTY

OWNERS NAME: *Mrs Howard Mc Comos Jr. & three other heirs of Wm. Seardl.*

STREET AND NUMBER: *Abingdon & Philadelphia Roads*

CITY OR TOWN: *Abingdon* STATE: *Md* CODE: *21009*

5. LOCATION OF LEGAL DESCRIPTION

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

STREET AND NUMBER: **HARFORD COUNTY COURTHOUSE 40 S. MAIN ST**

CITY OR TOWN: **BEL AIR** STATE: **MARYLAND** CODE:

ACREAGE

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

DESCRIBE THE PRESENT AND ORIGINAL (If known) PHYSICAL APPEARANCE

Stone masonry stuccoed out house about 10' square under a hip roof, facing east with a window in the north and south walls. In very poor condition, window sashes floors and woodwork is missing or out of place.

Unique - except to the main house - part of the east wall is not masonry, but frame! (In ~~the~~ Poca's ~~house~~ Rose Hill brick alternates unevenly with frame walls.)

SIGNIFICANCE			
PERIOD (Check One or More as Appropriate)			
Pre-Columbian <input type="checkbox"/>	16th Century <input type="checkbox"/>	18th Century <input 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	Education <input type="checkbox"/>	Political <input type="checkbox"/>	Urban Planning <input type="checkbox"/>
Prehistoric <input type="checkbox"/>	Engineering <input type="checkbox"/>	Religion/Phi-	Other (Specify) <input type="checkbox"/>
Historic <input type="checkbox"/>	Industry <input type="checkbox"/>	losophy <input type="checkbox"/>	<u>Association</u>
Agriculture <input type="checkbox"/>	Invention <input type="checkbox"/>	Science <input type="checkbox"/>	<u>w/</u>
Art <input type="checkbox"/>	Landscape	Sculpture <input type="checkbox"/>	<u>Historic</u>
Commerce <input type="checkbox"/>	Architecture <input type="checkbox"/>	Social/Human-	<u>Person</u>
Communications <input type="checkbox"/>	Literature <input type="checkbox"/>	itarian <input type="checkbox"/>	
Conservation <input type="checkbox"/>	Military <input type="checkbox"/>	Theater <input type="checkbox"/>	
Architecture <input type="checkbox"/>	Music <input type="checkbox"/>	Transportation <input type="checkbox"/>	
STATEMENT OF SIGNIFICANCE (Include Personages, Dates, Events, Etc.)			
<p style="font-size: 1.2em;">Thought to have been slave quarters of the original Pava family plantation, one of two similar buildings surviving from the days when William Pava lived at this site.</p>			

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: **JEAN S. EWING**

ORGANIZATION: **Maryland Historical Trust, Box 1704** DATE: _____
Annapolis, MD 21401

STREET AND NUMBER: _____

CITY OR TOWN: _____ STATE: _____ 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 _____