

130 9074404 44-907

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: Jericho - Abandoned House

AND/OR HISTORIC: "Jericoe"

2. LOCATION

STREET AND NUMBER: Lane eroded - enter on foot through lane of neighbor

CITY OR TOWN: Churchville

STATE: Md CODE: COUNTY: HARFORD CODE:

off to the Cool Branch Road, running west from Priest Ford Road.

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 type="checkbox"/>	Private <input checked="" type="checkbox"/>	Unoccupied <input checked="" type="checkbox"/>	Restricted <input type="checkbox"/>
Object <input type="checkbox"/>	Both <input type="checkbox"/>	Preservation work in progress <input type="checkbox"/>	Unrestricted <input checked="" 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"/>	<u>Abandoned</u>
Entertainment <input type="checkbox"/>	Museum <input type="checkbox"/>	Scientific <input type="checkbox"/>	

4. OWNER OF PROPERTY

OWNER'S NAME: James Barrow

STREET AND NUMBER: Churchville RFD

CITY OR TOWN: Churchville STATE: Maryland CODE:

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

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:

ENTRY NUMBER: DATE:

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7. DESCRIPTION

CONDITION	(Check One)					
	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Deteriorated <input type="checkbox"/>	Ruins <input checked="" 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

Abandoned stone house, 2 stories,
 3 bays x 1, almost square, the entrance
 on the north, windows facing east or west,
 with 6 lights over 6. A pair of chimneys
 rise inside the south wall from heating
 fireplaces on the first and second floors,
 and from a large cooking fire place in
 the lighted basement.

The A roof ridge line runs north-south.
 The cornice has a good dentelle trim.

Open to the weather in March 1972.

6 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"/>	<u>19th Century <input checked="" type="checkbox"/></u>	

SPECIFIC DATE(S) (If Applicable and Known) about 1820-40

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"/>	_____
Agriculture <input type="checkbox"/>	Invention <input type="checkbox"/>	Sculpture <input type="checkbox"/>	_____
Art <input type="checkbox"/>	Landscape <input type="checkbox"/>	Social/Humanitarian <input type="checkbox"/>	_____
Commerce <input type="checkbox"/>	Architecture <input type="checkbox"/>	Theater <input type="checkbox"/>	_____
Communications <input type="checkbox"/>	Literature <input type="checkbox"/>	Transportation <input type="checkbox"/>	_____
Conservation <input type="checkbox"/>	Military <input type="checkbox"/>		
<u>Architecture <input checked="" type="checkbox"/></u>	Music <input type="checkbox"/>		

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

This fine old house needs immediate care if it is to be saved. Land around it is being farmed but the yard and all buildings are being allowed to fall.

Once the country house of the Lee and Archer families, ~~it was built in 1820 by John Archer and his wife Elizabeth Archer.~~

9. MAJOR BIBLIOGRAPHICAL REFERENCES

[Empty space for 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 _____ DATE _____

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 _____