

# Kansas Historical Society

## Preliminary Site Information Questionnaire (PSIQ)

### To Evaluate National Register Eligibility for Properties in the State of Kansas

This questionnaire is intended to provide preliminary information to assist in evaluating a property's eligibility for the National Register of Historic Places and/or the Register of Historic Kansas Places. **This is not a nomination form.** If, based on this information, the property appears to meet the criteria for Register listing; we will send a nomination form to you. If you have any questions about this questionnaire, contact us at the number above.

Please be sure to include with this questionnaire photographs of each exterior side of the building and at least six interior photographs. If it is available also include a historic photo of the property (a photo copy is acceptable). If submitting digital photographs, only high resolution photographs of 300ppi or greater will be accepted. In answering these questions, you may attach additional pages as necessary.

Historic Name of Property: \_\_\_\_\_

Current Name or Other Names of the Property: \_\_\_\_\_

Street Address or Location: \_\_\_\_\_

City (or Vicinity): \_\_\_\_\_ County: \_\_\_\_\_

Historic Use: \_\_\_\_\_ Present Use: \_\_\_\_\_

Date of Original Construction: \_\_\_\_\_

Architect or Builder (if known): \_\_\_\_\_

Describe the property. Be sure to point out any notable features. If the property includes outbuildings or notable landscape features, mention them also. (You may attach additional pages if necessary).

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Historic Preservation Office  
6425 SW 6th Avenue  
Topeka KS 66615

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Please describe all known alterations to the property (for example: external foundation work, removal of cisterns, porch additions, siding additions, etc.)

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Why is the property historically or architecturally important?

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Provide a list of sources that document the historical significance of the property.

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Why is Register Listing being sought?

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**Submitter's Information**

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

If the person submitting this form is not the property owner, do you have the consent of the owner of the property to submit this form for listing consideration?

Yes       No

Date: \_\_\_\_\_