

DEPARTMENT OF ARKANSAS HERITAGE
ARKANSAS HISTORIC PRESERVATION PROGRAM

**HISTORIC PRESERVATION CERTIFICATION APPLICATION
PART 2 – DESCRIPTION OF REHABILITATION**

AHPP Office Use Only

AHPP No: _____

AHPP Office Use Only

Project No: _____

Instructions: Read the instructions carefully before completing the applications. No certifications will be made unless a completed application form has been received. Type or print clearly in black ink. If additional space is needed, use continuation sheets or attach blank sheets. A copy of this form may be provided to the Arkansas Department of Finance and Administration. The decision by the AHPP with respect to certification is made on the basis of the descriptions in this application form. In the event of any discrepancy between the application form and other, supplementary material submitted with it (such as architectural plans, drawings, and specifications), the application form shall take precedence.

1. Name of Property: JOHN & JANE SMITH HOUSE _____

Address of Property: Street 216 N MAIN ST. _____

City LITTLE ROCK _____ County PULASKI _____ State AR _____ Zip 72205 _____

Listed individually in the National Register of Historic Places; give date of listing: _____

Located in a Registered Historic District; specify: **HILLCREST HISTORIC DISTRICT** _____

Has a Part 1 Application (Evaluation of Significance) been submitted for this project? ☒ yes ☐ no

If yes, date Part 1 submitted: 1.01.26 _____ Date of certification: _____ AHPP Project Number: _____

2. Data on building and rehabilitation project:

Date building constructed: C. 1926 _____ Total number of housing units before rehabilitation: 1 _____

Type of construction: FRAME _____ Number that are low-moderate income: 0 _____

Use(s) before rehabilitation: residence _____ Total number of housing units after rehabilitation: 1 _____

Proposed use(s) after rehabilitation: residence _____ Number that are low-moderate income: 0 _____

Estimated cost of rehabilitation: \$25,000 _____ Floor area before rehabilitation: 2420 _____

Project start date (est.): 2.10.26 _____ Floor area after rehabilitation: 2420 _____

Completion date (est.): _____

3. Project contact:

Name ROBERT BLACK _____ Email Address R.BLACK@GMAIL.COM _____

Street 216 MAIN ST. _____ City LITTLE ROCK _____

State AR _____ Zip 72205 _____ Daytime Telephone Number 501-555-5555 _____

4. Owner:

I hereby attest that the information I have provided is, to the best of my knowledge, correct, and that I own the property described above.

Name ROBERT BLACK _____ Signature _____ Date 1.01.26 _____

Organization _____

Social Security or Taxpayer Identification Number 123-45-6789 _____ Email Address R.BLACK@GMAIL.COM _____

Street 216 N MAIN ST _____ City LITTLE ROCK _____

State AR _____ Zip 72205 _____ Daytime Telephone Number 501-555-5555 _____

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The Arkansas Historic Preservation Program has reviewed the "Historic Certification Application – Part 2" for the above-named property and has determined:

- that the rehabilitation described herein is consistent with the historic character of the property or the district in which it is located and that the project meets the Secretary of the Interior's "Standards for Rehabilitation." This letter is a preliminary determination only, since a format certification of rehabilitation can be issued only to the owner of a "certified historic structure" after rehabilitation work is completed.
- that the rehabilitation or proposed rehabilitation will meet the Secretary of the Interior's "Standards for Rehabilitation" if the attached conditions are met.
- that the rehabilitation described herein is not consistent with the historic character of the property or the district in which it is located and that the project does not meet the Secretary of the Interior's "Standards for Rehabilitation." A copy of this form may be provided to the Arkansas Department of Finance and Administration.

Date	AHPP Authorized Signature	AHPP Office/Telephone No.
See Attachments		

**HISTORIC PRESERVATION
CERTIFICATION APPLICATION –**

JOHN & JANE SMITH HOUSE

Property Name

PART 2

AHPP Office Use Only

216 N MAIN ST. LITTLE ROCK

Project Number:

Property Address

5. DETAILED DESCRIPTION OF REHABILITATION / PRESERVATION WORK – Includes site work, new construction, alterations, etc. Complete blocks below.

Number 1	Architectural feature Windows_____ Approximate Date of feature unknown_____	Describe work and impact on existing feature: The existing Primary Bathroom windows will be repaired, reglazed, and repainted.
Describe existing feature and its condition: The house has no original windows. A back balcony was enclosed with windows and a roof to create a sleeping porch, at an unknown date. The space was turned into a Primary Bathroom around 2018. The corner of the house, where these windows are located, was racked by a falling tree in April 2025. The windows now have gaping holes between them and the frame, and are leaking. The frames are all cracked. Photo no. 2,3,9,10_____ Drawing no N/A_____		
Number 2	Architectural feature Exterior Trim_____ Approximate Date of feature 1926_____	Describe work and impact on existing feature: The damaged siding and trim on the main house will be replaced with like kind.
Describe existing feature and its condition: The trim on the northwest corner of the house has been damaged by the falling tree. Some of it is cracked or gone. Photo no. 2,3_____ Drawing no N/A_____		
Number 3	Architectural feature Walls & Ceilings & Interior Trim_____ Approximate Date of feature unknown, 2018_____	Describe work and impact on existing feature: Window trim in the Primary Bathroom will be reinstalled. The handrail will be reinstalled in the stairhall and the wall will be patched.
Describe existing feature and its condition: The window trim in the Primary Bathroom is falling away from the wall. The handrail is coming out of the wall in the stairhall. Photo no. 9,10, 14_____ Drawing no N/A_____		
Number 4	Architectural feature Door Threshold_____ Approximate Date of feature 1926_____	Describe work and impact on existing feature: The rotten wood threshold at the back door will be replaced with a cedar threshold.
Describe existing feature and its condition: The wood threshold to the back of the door of the main house is rotted. Photo no. 13_____ Drawing no N/A_____		

**HISTORIC PRESERVATION
CERTIFICATION APPLICATION –**

JOHN & JANE SMITH HOUSE

Property Name

PART 2

AHPP Office Use Only

216 N MAIN ST. LITTLE ROCK

Project Number:

Property Address

Number 5	Architectural feature Stucco_____ Approximate Date of feature 1926, 2018_____ Describe existing feature and its condition: The stucco is peeling off of the house in certain areas, especially where a cable was snapped off the house by a falling tree and where the tree hit the house and shook the stucco. Photo no. 5,6,14_____ Drawing no N/A_____	Describe work and impact on existing feature: The stucco will be repaired as needed. The new stucco will match color and texture to the existing stucco.
Number 6	Architectural feature Paint_____ Approximate Date of feature 2018, 2024_____ Describe existing feature and its condition: There is some peeling paint around the Primary Bathroom windows where there has been water intrusion after the tree fell. There is peeling and chipped paint on some of the trim inside the house. Photo no. 2,3,8,9,10,11,14_____ Drawing no N/A_____	Describe work and impact on existing feature: All damaged and peeling paint will be scraped off. Any surface that needs repainting will be sanded and prepped for paint, and painted. All new wood will be sanded, prepped, primed (all 6 sides on new siding), and painted.
Number 7	Architectural feature Tile_____ Approximate Date of feature c. 1945_____ Describe existing feature and its condition: Some of the upstairs hall bathroom tile is falling off of the wall. The powder room floor is concrete with inset tile and a 6" tile cove base. Photo no. 7_____ Drawing no N/A_____	Describe work and impact on existing feature: The upstairs hall bathroom tile needs to be re-grouted. The existing tile floor in the powder room will be removed to access and repair the toilet sewer line. A new tile floor and wall tile will be installed.

**HISTORIC PRESERVATION
CERTIFICATION APPLICATION –**

Rieff Shrader House

Property Name

PART 2

AHPP Office Use Only

216 Linwood Court, Little Rock

Property Address

Project Number:

Number 9	Architectural feature Gutters _____ Approximate Date of feature _____ Describe existing feature and its condition: Gutters were installed on the main house in 2020. A gutter on the back of the house was significantly damaged when the tree fell. Photo no. 3,4,6,7 _____ Drawing no N/A _____	Describe work and impact on existing feature: A new gutter will be installed on the back of the house. All gutters will be cleaned of debris.
Number 10	Architectural feature Tile _____ Approximate Date of feature c. 1945 _____ Describe existing feature and its condition: Some of the upstairs hall bathroom tile is falling off of the wall. The powder room floor is concrete with inset tile and a 6" tile cove base. Photo no. 33-36 _____ Drawing no N/A _____	Describe work and impact on existing feature: The upstairs hall bathroom tile needs to be re-grouted. The existing tile floor in the powder room will be removed to access and repair the toilet sewer line. A new tile floor and wall tile will be installed.
Number 11	Architectural feature _____ Approximate Date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no _____	Describe work and impact on existing feature:
Number 12	Architectural feature _____ Approximate Date of feature _____ Describe existing feature and its condition: Photo no. _____ Drawing no _____	Describe work and impact on existing feature: