

**STATE HISTORICAL MARKER APPLICATION
MISSISSIPPI DEPARTMENT OF ARCHIVES AND HISTORY**

TITLE / SUBJECT OF HISTORICAL MARKER _____

COUNTY / MUNICIPALITY _____

IS THIS REQUEST FOR A NEW OR A REPLACEMENT MARKER?

NEW REPLACEMENT

APPLICANT INFORMATION

NAME (S) _____

ADDRESS _____

CITY _____ STATE ____ ZIP _____

PHONE (S) _____ / _____

EMAIL _____

FOR MDAH USE

DATE RECEIVED:

IS THIS APPLICATION BEING SUBMITTED ON BEHALF OF AN ORGANIZATION?

Examples: a business; a church; preservation organization; civic club; historical society and/or alumni association

YES NO

If **YES**, the application **MUST** include a letter from the organization supporting the application for a state historical marker and designating the applicant as the sole representative of the sponsoring organization for this application.

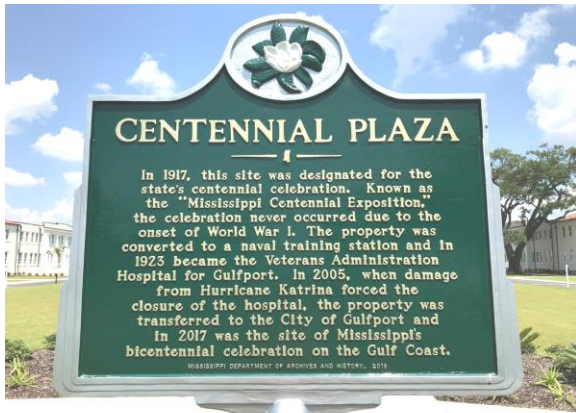
Name and address of sponsor organization (please include the chief executive office/president, etc. if someone other than the applicant):

ORGANIZATION _____

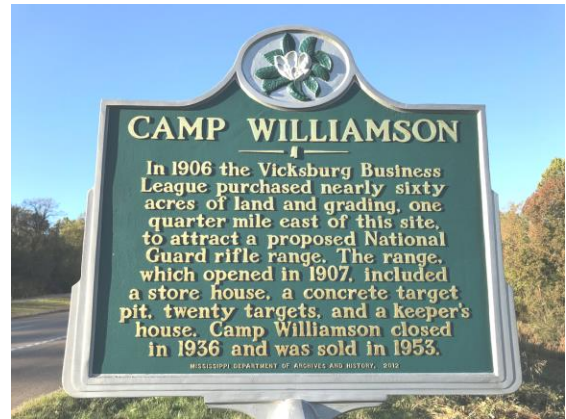
ADDRESS _____

City: _____ STATE ____ ZIP _____

Phone(s) _____ / _____ Email: _____



1"



1 ½"

STYLE OF MARKER PREFERRED (Please check one)

The 1" and 1 ½" size refers to the height of the letters on the marker. The 1" lettering is smaller, allowing more lines of text and more spaces per line. The 1 ½" inch lettering is larger and, therefore, has fewer lines of text and fewer spaces per line.

MARKER QUALIFICATIONS

In order for a site to qualify for a marker, the applicant must show that the subject is of historical significance to the local community, state, or nation. For places of worship, preference will be given to historic structures and/or structures associated with significant historical events, persons, or communities. For cemeteries, markers should recognize the cemetery's association with a community or significant persons, and/or cemetery art. The Board of Trustees may accept or reject any application for state historical markers.

16 Miss. Code R. § 3-2.1

Applications recognizing living persons are not allowed.

DOCUMENTATION

Applicants should provide as much supporting documentation as possible, including National Register nominations (if applicable), excerpts from county/local histories, and/or information from other published works. Please include copies of any available research materials as separate documents or attachments.

IS THE SUBJECT OF THE MARKER (ESPECIALLY IF IT IS A HISTORIC STRUCTURE) LISTED IN THE NATIONAL REGISTER OF HISTORIC PLACES?

YES NO NOT SURE

IF THE SUBJECT OF THE MARKER IS A CEMETERY, HAS IT BEEN CERTIFIED AS AN ABANDONED CEMETERY BY MDAH?

YES NO NOT SURE

SUGGESTED MARKER LOCATION [Please provide a street address if applicable]

IS THE MARKER TO BE LOCATED ON PUBLIC PROPERTY? YES NO
Examples: on a courthouse square; on public school property; in a public park

IF **YES**, THE APPLICATION **MUST** INCLUDE A LETTER FROM THE PUBLIC PROPERTY OWNER APPROVING THE ERECTION OF A MARKER AT THAT LOCATION.

PLEASE NOTE: In some instances, erection of a marker on public property may require a Mississippi Landmark permit issued by the MDAH Board of Trustees prior to the approval of a marker application.

NAME OF ADDRESS OF PUBLIC PROPERTY OWNER
Include name of the mayor, county supervisor(s) and/or other public official(s)

PUBLIC OWNER _____

MAILING ADDRESS _____

City: _____ ZIP _____

Phone(s) _____ Email: _____

CHECK ONE:

Municipal

County

State of Mississippi

IS THE MARKER TO BE LOCATED ON A STATE-MAINTAINED ROAD OR A COUNTY ROAD?

YES NO NOT SURE

IS THE MARKER LOCATION ON PRIVATE PROPERTY OWNED BY SOMEONE OTHER THAN THE SPONSOR(S) OR SPONSORING ORGANIZATION?

YES NO

IF **YES**, PLEASE PROVIDE THE NAME, ADDRESS AND CONTACT INFORMATION FOR THE OWNER(S) OF THE PROPERTY. [Please print]

NAME(S) _____

MAILING ADDRESS: _____

City: _____ STATE _____ ZIP _____

PHONE(S) _____ / _____ EMAIL _____

PROPOSED MARKER TEXT

DOES THE SPONSOR WISH TO SUGGEST A MARKER TEXT? YES NO

IF **YES**, PLEASE INCLUDE A SUGGESTED TEXT IN THE SPACE BELOW OR ON A SEPARATE PAGE.

- For a **1” text style maker**, there are a total of fourteen (14) lines of text available, including the title line. In the main text, each line should be no longer than **42** spaces. The title (which will be in bold type) should be no more than **30** spaces. Please remember that each letter, space between words, and/or punctuation takes up one space on the line. For example, the following sentence would take up 42 spaces:

The school, built in 1920, burned in 1970.

- For a **1 1/2 ” text style maker**, there are eleven (11) lines with 33 spaces per line: The top line is the title and should not exceed 25 spaces.

To check the length of each line, select the line, go to ‘Review/Word Count/Characters with Spaces’ in Word. Similar functions should be available in other programs.

The text for a state historical marker is drafted by MDAH staff with input from the sponsor(s). You are welcome to provide a suggested text. However, MDAH, in accordance with the policies adopted by the Board of Trustees, reserves the right to approve the final marker text. On the following page are some guidelines and helpful hints for writing the text for the marker. Also, for those who wish to use a grid in drafting a text, we have provided both the 1” and 1 ½” grids on a separate page for your convenience.

STATE HISTORICAL MARKER PAYMENT RESPONSIBILITY ACKNOWLEDGEMENT

I / We the undersigned sponsor(s) do hereby acknowledge and understand that the sponsor(s) are solely responsible for the cost of this state historical marker. Upon receipt of this application by MDAH and subsequent approval of the marker text drafted by MDAH staff in consultation with the sponsor(s) by the MDAH Board of Trustees, I/ we also certify that funding has been secured to pay for the marker and agree that payment will be submitted to the manufacturer upon receipt of an invoice and in a timely manner.

Sponsor(s) Name, Billing Address, Email and Phone Number(s):

Name of Sponsor (*please print*): _____

Billing Address: _____

City _____ State _____ ZIP _____

Signed _____

Date: _____