

NPS conditions or comments attached

## UNITED STATES DEPARTMENT OF THE INTERIORAL PARK SERVICE

RECEIVED

MAR 0 5 2019

OMB Approved No. 1024-0009 Form 10-168 Rev. 2014

## HISTORIC PRESERVATION CERTIFICATION APPLICATION AMENDMENT / ADVISORY DETERMINATION

NPS Project Number 36575 Instructions: This page must bear the applicant's original signature and must be dated. Marlboro Apartments TX17-1018 Property name 1031 Marlborough Street, Detroit, Wayne County, MI Property address This form includes additional information requested by NPS for an application currently on hold. П updates applicant or contact information. amends a previously submitted Part 1 of Part 2 Part 3 application. requests an advisory determination that phase of \_\_\_\_\_ phases of this rehabilitation project meets the Secretary of the Interior's Standards for Rehabilitation. Phase completion date Estimated rehabilitation costs of phase (QRE) Summarize information here; continue on following page if necessary. Amendment 2 conveys updated project details HERITAGE CONSULTING GROUP Project Contact (if different from applicant) Name John M. Tess, President Heritage Consulting Group Company Street 1120 NW Northrup Street Portland OR 97209-2852 <sub>Telephone</sub> (503) 228-0272 Email Address jmtess@heritage-consulting.com **Applicant** I hereby attest that the information I have provided is, to the best of my knowledge, correct. I further attest that [check one or both boxes, as applicable] (1) 🔳 I am the owner of the above-described property within the meaning of "owner" set forth in 36 CFR § 67.2 (2011), and/or (2) [ if I am not the fee simple owner of the abovedescribed property, the fee simple owner is aware of the action I am taking relative to this application and has no objection, as noted in a written statement from the owner, a copy of which (i) either is attached to this application form and incorporated herein, or has been previously submitted, and (ii) meets the requirements of 36 CFR § 67.3(a)(1) (2011). For purposes of this attestation, the singular shall include the plural wherever appropriate, understand that knowing and willful falsification of factual representations in this application may subject me to fines and imprisonment under 18 U.S.C § 1001, which, under certain circumstances, provides for imprisonment of up to 8 years. Name Kathy Makino Signature Applicant Entity Shelbourne Development Company LLC 38-3586434 8445 East Jefferson Avenue Detroit Email Address kathysmakino@aol.com 48214-2721 <sub>Telephone</sub> (734) 905-8323 Applicant, SSN, or TIN has changed since previously submitted application. **NPS Official Use Only** The National Park Service has reviewed this amendment to the Historic Preservation Certification Application and has determined that the amendment: meets the Secretary of the Interior's Standards for Rehabilitation. will meet the Secretary of the Interior's Standard for Rehabilitation if the attached conditions are met. does not meet the Secretary of the Interior's Standards for Rehabilitation. updates the information on file and does not affect the certification. **Advisory Determinations:** The National Park Service has determined that the work completed in this phase is consistent with the Secretary of the Interior's Standards for Rehabilitation. This determination is advisory only. A formal certification of rehabilitation can be issued only after all rehabilitation work and any associated site work or new construction have been completed. This approval could be superseded if it is found that the overall rehabilitation does not meet the Secretary's Standards. A copy of this form will be provided to the Internal Revenue Service. gulas 207-354-2032 National Park Service Authorized Signatur