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Form 10-300
(Dec. 1968)

UNITED STATES DEPARTMENT OF THE INTERIOR
NATIONAL PARK SERVICE

N. R. FIELD SHEET

MD. HISTORICAL TRUST
BOX 1704
ANNAPOLIS, MD. 21404

# 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: Kilgore ~~[illegible]~~ ~~for~~ & Dooley ~~frame~~ house

AND/OR HISTORIC:

3259 Dublin Road, Dublin

## 2. LOCATION

STREET AND NUMBER: South side of Dublin Road about 200' west of Whiteford Road

CITY OR TOWN: Dublin

STATE: Maryland | CODE | COUNTY: Harford | CODE

## 3. CLASSIFICATION

| CATEGORY (Check One) | | OWNERSHIP | | STATUS | ACCESSIBLE TO THE PUBLIC |
|---|---|---|---|---|---|
| District ☐ | Building ☐ | Public ☐ | Public Acquisition: | Occupied ☐ | Yes: |
| Site ☐ | Structure ☐ | Private ☐ | In Process ☐ | Unoccupied ☐ | Restricted ☐ |
| Object ☐ | | Both ☐ | Being Considered ☐ | Preservation work in progress ☐ | Unrestricted ☐ |
| | | | | | No: ☐ |

PRESENT USE (Check One or More as Appropriate)

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Agricultural | ☐ | Government | ☐ | Park | ☐ | Transportation | ☐ | Comments | ☐ |
| Commercial | ☐ | Industrial | ☐ | Private Residence | ☐ | Other (Specify) | ☐ | | |
| Educational | ☐ | Military | ☐ | ~~Religious~~ | ☐ | | | | |
| Entertainment | ☐ | Museum | ☐ | Scientific | ☐ | | | | |

## 4. OWNER OF PROPERTY

OWNERS NAME: Annie A Kilgore and Miss Mary Dooley

STREET AND NUMBER: Dublin

CITY OR TOWN: Darlington RFD | STATE: Maryland 21034 | 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: FOR NPS USE ONLY ENTRY NUMBER DATE

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## 7. DESCRIPTION

| | | | | | | |
|---|---|---|---|---|---|---|
| CONDITION | (Check One) Excellent ☐ | Good ☐ | Fair ☑ | Deteriorated ☐ | Ruins ☐ | Unexposed ☐ |
| INTEGRITY | (Check One) Altered ☐ | Unaltered ☑ | | (Check One) Moved ☐ | Original Site ☑ | |

DESCRIBE THE PRESENT AND ORIGINAL (*if known*) PHYSICAL APPEARANCE

Three-part house - the largest section in the middle. Frame ends and Log centre section covered with clapboard.

The house faces north. The ridgeline runs east-west; all parts are two storied.

The center section is three bayed ~~by~~ downstairs, two windows upstairs. Chimneys at either end ~~have~~ ~~look~~ similar brick tops - the one on the west is exterior (perhaps over a drumstick ~~chimney~~ fireplace). The west section has two windows on the north, one upstairs at the end of the house. The east end has an uneven pattern of windows, 2 downstairs, 1 up, by 1 at the east end. Windows in the ends have 6 lights over 6, in the centre 4 over 4. There is a porch on the north across the first floor of the centre section, one on the south at the east section.

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## 8. SIGNIFICANCE

**PERIOD** *(Check One or More as Appropriate)*

| | | | |
|---|---|---|---|
| Pre-Columbian ☐ | 16th Century ☐ | 18th Century ☐ ? | 20th Century ☐ |
| 15th Century ☐ | 17th Century ☐ | 19th Century ☐ | |

**SPECIFIC DATE(S)** *(If Applicable and Known)*

**AREAS OF SIGNIFICANCE** *(Check One or More as Appropriate)*

| | | | |
|---|---|---|---|
| Aboriginal | Education ☐ | Political ☐ | Urban Planning ☐ |
| Prehistoric ☐ | Engineering ☐ | Religion/Philosophy ☐ | Other *(Specify)* ☐ |
| Historic ☐ | Industry ☐ | Science ☐ | |
| Agriculture ☐ | Invention ☐ | Sculpture ☐ | |
| Art ☐ | Landscape Architecture ☐ | Social/Humanitarian ☐ | |
| Commerce ☐ | Literature ☐ | Theater ☐ | |
| Communications ☐ | Military ☐ | Transportation ☐ | |
| Conservation ☐ | Music ☐ | | |
| Architecture ☐ | | | |

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

Little is known of the ages of this house, as with most of Dublin. Pleasant proportions, perhaps considerable interest in log construction and possibly the chimney — investigation warranted.

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## 9. MAJOR BIBLIOGRAPHICAL REFERENCES

*

* study of this area warranted?

## 10. GEOGRAPHICAL DATA

| LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY | | | | | | OR | 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 |
|---|---|---|---|
| STATE: | CODE | COUNTY: | CODE |
| STATE: | CODE | COUNTY: | CODE |
| STATE: | CODE | COUNTY: | CODE |

## 11. FORM PREPARED BY

NAME AND TITLE: JEAN S. EWING

ORGANIZATION: MARYLAND HISTORICAL TRUST | DATE:

STREET AND NUMBER: 50 STATE CIRCLE

CITY OR TOWN: ANNAPOLIS | STATE: MARYLAND | CODE:

## 12. STATE LIAISON OFFICER CERTIFICATION

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 _____

## NATIONAL REGISTER VERIFICATION

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 _____