

MD. HISTORICAL TRUST  
BOX 1704  
P.O. BOX 1704, 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: Andrew Thomas' house

AND/OR HISTORIC:

2. LOCATION

STREET AND NUMBER: West side of Robin Hood Road about 0.1 mi

CITY OR TOWN: near Haver & Grace South of Chapel Road

STATE: Maryland CODE: COUNTY: HARFORD CODE:

3. CLASSIFICATION

CATEGORY (Check One)	OWNERSHIP	STATUS	ACCESSIBLE TO THE PUBLIC
District <input type="checkbox"/> Building <input checked="" type="checkbox"/>	Public <input type="checkbox"/>	<u>Occupied</u> <input checked="" type="checkbox"/>	Yes: <u>Restricted</u> <input checked="" type="checkbox"/>
Site <input type="checkbox"/> Structure <input checked="" type="checkbox"/>	Private <input checked="" type="checkbox"/>	Unoccupied <input type="checkbox"/>	Unrestricted <input type="checkbox"/>
Object <input type="checkbox"/>	Both <input type="checkbox"/>	Preservation work in progress <input type="checkbox"/>	No: <input type="checkbox"/>
PRESENT USE (Check One or More as Appropriate)			
Agricultural <input type="checkbox"/>	Government <input type="checkbox"/>	<u>Park</u> <input checked="" type="checkbox"/>	Transportation <input type="checkbox"/>
Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>	<u>Private Residence</u> <input checked="" type="checkbox"/>	Other (Specify) <input type="checkbox"/>
Educational <input type="checkbox"/>	Military <input type="checkbox"/>	Religious <input type="checkbox"/>	
Entertainment <input type="checkbox"/>	Museum <input type="checkbox"/>	Scientific <input type="checkbox"/>	

4. OWNER OF PROPERTY

OWNERS NAME: Mrs Andrew Thomas

STREET AND NUMBER: Robin Hood Road

CITY OR TOWN: Haver & Grace RFD STATE: Md 21078 CODE:

5. LOCATION OF LEGAL DESCRIPTION

COURTHOUSE, REGISTRY OF DEEDS, ETC.: CITY AND COUNTY CLERK

STREET AND NUMBER: HARFORD COUNTY CLERK

CITY OR TOWN: DEL 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:

ENTRY NUMBER DATE

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7. DESCRIPTION

CONDITION	(Check One)					
	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Deteriorated <input checked="" type="checkbox"/>	Ruins <input type="checkbox"/>	Unexposed <input type="checkbox"/>
INTEGRITY	(Check One)			(Check One)		
	Mud <input checked="" type="checkbox"/> Altered <input type="checkbox"/>			Moved <input type="checkbox"/> Original Site <input checked="" type="checkbox"/>		

DESCRIBE THE PRESENT AND ORIGINAL (If known) PHYSICAL APPEARANCE

Log and frame house clapboard covered with asphalt shingles. T shaped, a log ~~was 2 story deep~~ house 1 1/2 stories faces west. The roof ridge line runs north south. One chimney rises from the center of this section. Two dormers light the upper story. Three windows in the south gable end upstairs, and a 4 frame bay window in the south down-stair. This section ~~was~~ <sup>was</sup> ~~the two story addition~~ originally 3 bays x 1 as is the ~~frame~~ <sup>frame</sup> two story addition running east-west across the north end of the house. Windows are 1 light on 1 except in the east and west windows of the small section.

**B. 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	<input type="checkbox"/>	Political	<input type="checkbox"/>	Urban Planning	<input type="checkbox"/>
Prehistoric	Engineering	<input type="checkbox"/>	Religion/Phi-		Other (Specify)	<input type="checkbox"/>
Historic	Industry	<input type="checkbox"/>	losophy	<input type="checkbox"/>	_____	
Agriculture	Invention	<input type="checkbox"/>	Science	<input type="checkbox"/>	_____	
Art	Landscape	<input type="checkbox"/>	Sculpture	<input type="checkbox"/>	_____	
Commerce	Architecture	<input type="checkbox"/>	Social/Humon-		<u>Suburbanization</u>	
Communications	Literature	<input type="checkbox"/>	itarian	<input type="checkbox"/>	_____	
Conservation	Military	<input type="checkbox"/>	Theater	<input type="checkbox"/>	_____	
Architecture	Music	<input type="checkbox"/>	Transportation	<input type="checkbox"/>	_____	

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

This unusual little house remains despite difficult maintenance for an elderly widow. A peculiar mixture of ages and styles. The central story, and a half section may be quite old.

9. MAJOR BIBLIOGRAPHICAL REFERENCES

Blank area for major bibliographical references.

10. GEOGRAPHICAL DATA

LATITUDE AND LONGITUDE COORDINATES DEFINING A RECTANGLE LOCATING THE PROPERTY			O R	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: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_ DATE: \_\_\_\_\_

STREET AND NUMBER: \_\_\_\_\_

CITY OR TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ 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 \_\_\_\_\_