



Arkansas Architectural Resources Survey Form

**ARKANSAS
HISTORIC
PRESERVATION
PROGRAM**

- 1. Resource Number:
- 2. NR Eligibility:
 01-Eligible 02-Ineligible 03-Listed 05-Arkansas Register Listed
 06-Contributing in a Listed District 08-Contributing in a Potential District
- 3. Contributing/Non-Contributing:
- 4. Destroyed: (Y or N) Date:

Above for AHPP Use Only

Survey Data

- 5. Date Recorded: / /
- 6. Recorded By: S. Elizabeth Valenzuela
Miriam Tworek-Hofstetter
- 7. Survey Number:

- 8. Historic Name: 509 Pleasant Street House
- 9. Alternate Name: N/A
- 10. District Name: Pleasant Street Historic District
- 11. Quad Map:
- 12. Geographic Location: S T R
- 13. UTM Coordinates: Z E N
- 14. Town/Nearest Community: Hot Springs
- 15. Street Address/Directions to Resource: 509 Pleasant Street

- 16. Owner: Healthy Connection, Inc.
- 17. Owner Address: PO Box 1848, Mena, AR 71953
- 18. Owner Phone Number: () -
- 19. Informant Name & Phone Number: _____
() -

Descriptive Data

- 20. Threats to Property: Other: demolished
- 1-None/Property Stable 2-Neglect/Deterioration 5-Private Development 6-Extractive Industry
 7-Urban Encroachment 8-Government Activity 9-Other

37. Chimney Placement: A B C D Other: _____
 1-Exterior End 2-Interior End 3-Other Exterior 4-Interior Central 5-Other Interior 9-Other
38. Chimney Materials: A B C D Other: _____
 1-Brick 4-Cut Stone 5-Field Stone 6-Metal 9-Other
39. Foundation Type: A Other: _____
 1-Continuous 2-Piers 4-Enclosed Piers 9-Other
40. Foundation Materials: A Other: _____
 1-Wood Block 2-Stone 3-Brick 4-Cast Concrete 5-Concrete Block 9-Other
41. Porch Types: A B C Other: _____
 01-Full, Front 02-Three-quarter, Front 03-One-Bay, Central Front 05-Wrap-around
 06-Awning 07-One-Half, Front 08-Recessed, Front 09-Side 15-Stoop 99-Other
42. Porch Height (Stories): A B C D Other: _____
 1-One 2-One & One-Half 3-Two 4-Two & One-Half 9-Other
43. Porch Roof Types: A B C D Other: _____
 1-Gable 2-Hip 3-Flat 4-Shed 5-Clipped Gable 6-Integral 9-Other
44. Porch Details: A B C Other: _____
 01-Chamfered Posts 02-Turned Posts 03-Columns 04-Balustrade 05-Wood Ornament
 08-Columns on Piers 11-Posts 12-Iron Posts 13-Screened-in 14-Iron Railing 99-Other
45. Window Type(s): A B C D Other: _____
 1-Double-hung 3-Casement 4-Stationary 6-Hopper 7-Awning 9-Other/Materials
46. Light Pane Arrangement: A / B / C /
47. Condition:
 1-Excellent 2-Good 3-Fair 4-Deteriorated 5-Ruin
48. Architectural Comments: Demolished

Historic Data:

49. Architect: N/A _____
50. Builder: N/A _____
51. Construction Date: C-circa D-date Other: _____
52. Historic Context: Building demolished.
53. Ethnic Heritage: A B Other: _____
 01-Asian 02-African American 03-European 04-Hispanic 05-Native American
 06-Early American/Caucasian 99-Other
54. Please rate the level of significance of this property compared to others within survey area:
 1-Very Significant 2-Moderately Significant 3-Significant Within a Group Context
 4-Marginal 5-Non-Significant