

United States Department of the Interior
National Park Service

National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in National Register Bulletin, *How to Complete the National Register of Historic Places Registration Form*. If any item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. **Place additional certification comments, entries, and narrative items on continuation sheets if needed (NPS Form 10-900a).**

1. Name of Property

historic name Eastmoreland Historic District

other names/site number N/A

Name of Multiple Property Listing Historic Residential Suburbs in the United States, 1830-1960

(Enter "N/A" if property is not part of a multiple property listing)

2. Location

street & number Various not for publication

city or town Portland vicinity

state Oregon code OR county Multnomah code 051 zip code 97202

3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended,

I hereby certify that this nomination ___ request for determination of eligibility meets the documentation standards for registering properties in the National Register of Historic Places and meets the procedural and professional requirements set forth in 36 CFR Part 60.

In my opinion, the property meets ___ does not meet the National Register Criteria. I recommend that this property be considered significant at the following level(s) of significance: ___ national ___ statewide X local

Applicable National Register Criteria: X A ___ B X C ___ D



09/30/22

Signature of certifying official/Title: Deputy State Historic Preservation Officer

Date

Oregon State Historic Preservation Office
State or Federal agency/bureau or Tribal Government

In my opinion, the property ___ meets ___ does not meet the National Register criteria.

Signature of commenting official

Date

Title _____ State or Federal agency/bureau or Tribal Government

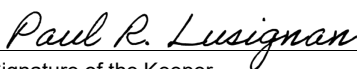
4. National Park Service Certification

I hereby certify that this property is:

X entered in the National Register ___ determined eligible for the National Register

___ determined not eligible for the National Register ___ removed from the National Register

___ other (explain:) _____



12/07/2022

Signature of the Keeper

Date of Action