

This form must be returned to the City of Austin Historic Preservation Office by January 15 of the year in which the property owner is seeking this property tax exemption.

THE STATE OF Texas §
COUNTY OF Travis §

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name Andrew Bowman and Rachel
Lomas % Stahl Bernal & Davies
Owner's Address 212 West 33rd Street
Owner's Telephone (512) 407-8703
Select one: ☒ Homestead ☐ Non-Homestead
☐ Check here if not 100% Homestead

TCAD ID 02-1804-1301-0001
Property Name Simms House
Property Address 212 West 33rd Street
Zoning Case No. C14H-1996-0001-

BEFORE ME THE UNDERSIGNED NOTARY APPEARED Andrew Bowman [AFFIANT NAME HERE], WHO, BEING DULY SWORN ON OATH STATES:

My name is Andrew Bowman.

I am over 18 years of age and am competent to sign this Affidavit.
I am the owner of the property identified above.
I am seeking a tax exemption for the property identified above.

RECIEVED

JAN 22 2013

Planning & Development Review

The requirements concerning the preservation and maintenance of the historic landmark property ordinance (Chapter 25-11-216 of the City Code) are fully satisfied as of January 1 of the year for which this exemption is claimed.

This property is a Recorded Texas Historic Landmark No., or State Archeological Landmark No.
OR

This property is in need of tax relief to encourage its preservation because [state reason here] We spent over \$20,000 in architectural fees to do a major renovation. Those fees were just to meet with certificate of appropriateness committee and adjust our plans to comply with their recommendations. The entire remodel was adjusted to meet their requirements.

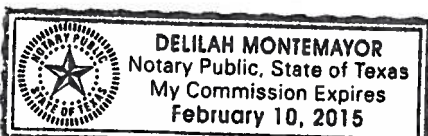
I authorize the City of Austin Historic Preservation staff to visit and inspect the exterior of the historic property, and any related books and records, as may be necessary to certify that the statements made in this Affidavit are true and correct.

Signature [Signature]
Owner/Applicant

1/15/13
Date

I declare under perjury that the statements above are true and correct.

Subscribed and sworn to before me, by [owner] Andrew Bowman, this the 15th day of January, 2013, to certify which witness my hand and seal of office.



Delilah Montemayor
Notary Public, State of TX
My commission expires Feb 10, 2015

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name Andrew Bowman and Rachel

Lomas % Stahl Bernal & Davies

Owner's Address 212 West 33rd Street

Owner's Telephone (512) 407-8703

Select one: ☒ Homestead ☐ Non-Homestead

☐ Check here if not 100% Homestead

TCAD ID 02-1804-1301-0001

Property Name Simms House

Property Address 212 West 33rd Street

Zoning Case No. C14H-1996-0001-

CERTIFICATION

To be completed by the City of Austin and forwarded to the Travis County Appraisal District:

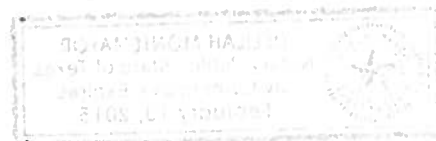
____ This is to certify that the historic property for which the exemption is requested is a Recorded Historic Texas Landmark or State Archeological Landmark and is being preserved and maintained as required by the City Code.

____ This is to certify that the historic property for which the exemption is requested is in need of tax relief to encourage its preservation and is being preserved and maintained as required by the City Code.

____ This is to certify that the historic property for which the exemption is requested is not in need of tax relief to encourage its preservation or is not being preserved and maintained as required by the City Code.
Comments: _____

City of Austin, Historic Preservation Officer

Date



Date of inspection: 3/27/13
NH

**CITY OF AUSTIN
HISTORIC LANDMARK TAX EXEMPTION INSPECTION FORM**

Address: 212 West 33rd Street Case # C14H-1996-0001-
Owner: Andrew Bowman and Rachel Lomas % Stahl Bernal & Davies Building name: Simms
House
Owner phone: (512) 407-8703

Results of previous annual inspection: Pass - no deficiencies
Notes from previous inspection: _____
Permits issued in past year: _____

FOUNDATION:

- ☐ Visible dampness or poor drainage
☐ Visible structural deficiencies

WALLS:

- ☐ Loose masonry units, vertical cracks,
open mortar joints
☐ Siding damaged or rotting
☐ Siding needs repainting
☐ Visible structural deficiencies

ROOF/DRAINAGE:

- ☐ Missing, loose, damaged, or clogged
gutters, downspouts, or flashing
☐ Missing, loose, or cracked tiles or
shingles

DECORATIVE ELEMENTS:

- ☐ Railings/trim need repair/repainting
☐ Porch floors and supports need repair
or repainting

DOORS AND WINDOWS:

- ☐ Doors and/or door-frames need repair or
repainting
☐ Broken or missing window panes
☐ Sills, lintels, or sashes need repair or
repainting
☐ Damaged/torn screens
☐ Glazing putty needs repair/replacement

GROUND, ACCESSORY BLDGS:

- ☐ Accessory buildings, fences, or other
structures need repair
☐ Vermin, weeds, fallen trees or
limbs, debris, abandoned vehicles or other
refuse in yard

OTHER:

- ☐ Unapproved alterations or additions
☐ Violations of sign regulations

LANDMARK PLAQUE:

- ☒ Landmark plaque

COMMENTS:

Barking dog - from street no def. seen.

PHOTO LOG (Date/Photo #s): _____

INSPECTION RESULTS:

- ☒ PASS, no deficiencies
☐ PASS, minor deficiencies
☐ FAIL

Inspector

Date

4/2/13

☒

This form must be returned to the City of Austin Historic Preservation Office by January 15 of the year in which the property owner is seeking this property tax exemption.

THE STATE OF _____ §
COUNTY OF _____ §

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name James Brand, M. D. TCAD ID 01-0404-0114
Owner's Address 802 Barton Boulevard Property Name Rocky Cliff House
Owner's Telephone (512) 326-9489 Property Address 802 Barton Boulevard
Select one: ☐ Homestead ☐ Non-Homestead Zoning Case No. C14H-1996-0002-
☐ Check here if not 100% Homestead

BEFORE ME THE UNDERSIGNED NOTARY APPEARED JAMES BRAND MD [AFFIANT NAME HERE], WHO, BEING DULY SWORN ON OATH STATES:

My name is JAMES BRAND MD.

I am over 18 years of age and am competent to sign this Affidavit.

I am the owner of the property identified above.

I am seeking a tax exemption for the property identified above.

The requirements concerning the preservation and maintenance of the historic landmark property ordinance (Chapter 25-11-216 of the City Code) are fully satisfied as of January 1 of the year for which this exemption is claimed.

This property is a Recorded Texas Historic Landmark Yes, or State Archeological Landmark No.
OR

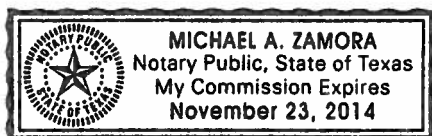
This property is in need of tax relief to encourage its preservation because [state reason here] _____

I authorize the City of Austin Historic Preservation staff to visit and inspect the exterior of the historic property, and any related books and records, as may be necessary to certify that the statements made in this Affidavit are true and correct.

Signature [Signature] 11/7/13
Owner/Applicant Date

I declare under perjury that the statements above are true and correct.

Subscribed and sworn to before me, by [owner] JAMES RUTLAND BRAND, this the 7TH day of JANUARY, 2013, to certify which witness my hand and seal of office.



[Signature]
Notary Public, State of TEXAS
My commission expires 11/23/2014

JAN U9 2013
NPZD/CHPO

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name James Brand, M. D.
Owner's Address 802 Barton Boulevard
Owner's Telephone (512) 326-9489
Select one: ☐ Homestead ☐ Non-Homestead
☐ Check here if not 100% Homestead

TCAD ID 01-0404-0114
Property Name Rocky Cliff House
Property Address 802 Barton Boulevard
Zoning Case No. C14H-1996-0002-

CERTIFICATION

To be completed by the City of Austin and forwarded to the Travis County Appraisal District:

☐ This is to certify that the historic property for which the exemption is requested is a Recorded Historic Texas Landmark or State Archeological Landmark and is being preserved and maintained as required by the City Code.

☐ This is to certify that the historic property for which the exemption is requested is in need of tax relief to encourage its preservation and is being preserved and maintained as required by the City Code.

☐ This is to certify that the historic property for which the exemption is requested is not in need of tax relief to encourage its preservation or is not being preserved and maintained as required by the City Code.
Comments: _____

City of Austin, Historic Preservation Officer

Date



Date of inspection: _____

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**CITY OF AUSTIN
HISTORIC LANDMARK TAX EXEMPTION INSPECTION FORM**

Address: 802 Barton Boulevard
Owner: James Brand, M. D.
Owner phone: (512) 326-9489

Case # C14H-1996-0002-
Building name: Rocky Cliff House

Results of previous annual inspection: Pass - minor deficiency
Notes from previous inspection: Siding damaged or rotting. Sills, lintels or sashes need repair/repainting.
Permits issued in past year: _____

FOUNDATION:

- ☐ Visible dampness or poor drainage
☐ Visible structural deficiencies

WALLS:

- ☐ Loose masonry units, vertical cracks, open mortar joints
☐ Siding damaged or rotting
☐ Siding needs repainting
☐ Visible structural deficiencies

ROOF/DRAINAGE:

- ☐ Missing, loose, damaged, or clogged gutters, downspouts, or flashing
☐ Missing, loose, or cracked tiles or shingles

DECORATIVE ELEMENTS:

- ☐ Railings/trim need repair/repainting
☐ Porch floors and supports need repair or repainting

DOORS AND WINDOWS:

- ☐ Doors and/or door-frames need repair or repainting
☐ Broken or missing window panes
☐ Sills, lintels, or sashes need repair or repainting
☐ Damaged/torn screens
☐ Glazing putty needs repair/replacement

GROUND, ACCESSORY BLDGS:

- ☐ Accessory buildings, fences, or other structures need repair
☐ Vermin, weeds, fallen trees or limbs, debris, abandoned vehicles or other refuse in yard

OTHER:

- ☐ Unapproved alterations or additions
☐ Violations of sign regulations

LANDMARK PLAQUE:

- ☒ Landmark plaque

COMMENTS:

PHOTO LOG (Date/Photo #s): _____

INSPECTION RESULTS:

- ☒ PASS, no deficiencies
☐ PASS, minor deficiencies
☐ FAIL

Inspector

Steve Sadowsky

Date

4-13-13

THE JOURNAL OF THE ROYAL ANTHROPOLOGICAL INSTITUTE

VOLUME 100 PART 1 2000

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THE STATE OF _____ §
COUNTY OF _____ §

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name Robert Tessen
Texas Osteopathic Medical Association
Owner's Address 1415 Lavaca
Owner's Telephone (512) 708-8662

TCAD ID 02-1002-2601
Property Name Bartholomew - Robinson Building
Property Address 1415 Lavaca Street
Zoning Case No. C14H-1996-0003-

Select one: ☐ Homestead ☐ Non-Homestead
☐ Check here if not 100% Homestead

BEFORE ME THE UNDERSIGNED NOTARY APPEARED Robert Tessen [AFFIANT NAME HERE], WHO, BEING DULY SWORN ON OATH STATES:

My name is Robert Tessen.

I am over 18 years of age and am competent to sign this Affidavit.
I am the owner of the property identified above.
I am seeking a tax exemption for the property identified above.

The requirements concerning the preservation and maintenance of the historic landmark property ordinance (Chapter 25-11-216 of the City Code) are fully satisfied as of January 1 of the year for which this exemption is claimed.

This property is a Recorded Texas Historic Landmark No, or State Archeological Landmark No.
OR

This property is in need of tax relief to encourage its preservation because [state reason here]
Maintenance & repair of the building to maintain architectural standards is costly, particularly for a non-profit organization

I authorize the City of Austin Historic Preservation staff to visit and inspect the exterior of the historic property, and any related books and records, as may be necessary to certify that the statements made in this Affidavit are true and correct.

Signature [Signature]
Owner/Applicant

1/7/13
Date

I declare under perjury that the statements above are true and correct.

Subscribed and sworn to before me, by [owner] Robert Tessen, this the 7th day of January, 2013, to certify which witness my hand and seal of office.



[Signature]
Notary Public, State of Texas
My commission expires 6/29/2015

JAN 09 2013

NPZD/CHPO

AFFIDAVIT FOR CERTIFICATION OF HISTORIC OR ARCHEOLOGICAL SITES

Owner's Name Robert Tessen
Texas Osteopathic Medical Association
Owner's Address 1415 Lavaca
Owner's Telephone (512) 708-8662
Select one: ☐ Homestead ☐ Non-Homestead
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CERTIFICATION

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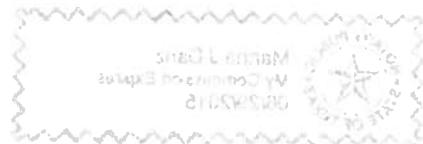
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Comments: _____

City of Austin, Historic Preservation Officer

Date



Date of inspection: _____

**CITY OF AUSTIN
HISTORIC LANDMARK TAX EXEMPTION INSPECTION FORM**

Address: 1415 Lavaca Street
Owner: Robert Tessen
Texas Osteopathic Medical Association
Building
Owner phone: (512) 708-8662

Case # C14H-1996-0003-

Building name: Bartholomew - Robinson

Results of previous annual inspection: Pass - no deficiencies

Notes from previous inspection: _____

Permits issued in past year: _____

FOUNDATION:

- ☐ Visible dampness or poor drainage
☐ Visible structural deficiencies

WALLS:

- ☐ Loose masonry units, vertical cracks,
open mortar joints
☐ Siding damaged or rotting
☐ Siding needs repainting
☐ Visible structural deficiencies

ROOF/DRAINAGE:

- ☐ Missing, loose, damaged, or clogged
gutters, downspouts, or flashing
☐ Missing, loose, or cracked tiles or
shingles

DECORATIVE ELEMENTS:

- ☐ Railings/trim need repair/repainting
☐ Porch floors and supports need repair
or repainting

DOORS AND WINDOWS:

- ☐ Doors and/or door-frames need repair or
repainting
☐ Broken or missing window panes
☐ Sills, lintels, or sashes need repair or
repainting
☐ Damaged/torn screens
☐ Glazing putty needs repair/replacement

GROUND, ACCESSORY BLDGS:

- ☐ Accessory buildings, fences, or other
structures need repair
☐ Vermin, weeds, fallen trees or
limbs, debris, abandoned vehicles or other
refuse in yard

OTHER:

- ☐ Unapproved alterations or additions
☐ Violations of sign regulations

LANDMARK PLAQUE:

- ☒ Landmark plaque

COMMENTS:

PHOTO LOG (Date/Photo #s): _____

INSPECTION RESULTS:

- ☒ PASS, no deficiencies
☐ PASS, minor deficiencies
☐ FAIL

Inspector *Emale*

Date 3/4/13 ✓

