**VA Program Comment Form 1-A**

VA Progra

*This section to be completed by facility staff. Use continuation sheet if necessary.*

**Facility Name and Location:** Click or tap here to enter text.

**Building Numbe****r:** Click or tap here to enter text.

**Historic Use/Function:** Click or tap here to enter text.

**Date vacated and/or number of years vacant:** Click or tap here to enter text.

**Date listed as underutilized and/or # of years underutilized:** Click or tap here to enter text.

 **Type of building:**[ ]  **utilitarian**[ ]  **non-utilitarian**

 **Photo: **

**Describe Proposed Undertaking/Action:** Click or tap here to enter text.

**Check the Applicable Undertaking (choose 1) and Provide Explanation:**

[ ]  **Enhanced Use Leases, NHPA Section 111 Leases and Exchanges**

Click or tap here to enter text.

[ ]  **Sales, Transfers, Exchanges, Conveyances**

Click or tap here to enter text.

[ ]  **Deconstruction, Demolition**Click or tap here to enter text.

[ ]  **Maintenance and repair of non-historic properties and utilitarian historic properties**Click or tap here to enter text.

**Are there any ground-disturbing activities associated with Undertaking?** Choose an item.

**If yes, describe the activities in detail and include a map as an attachment indicating where these activities will likely occur (Area of Potential Effects [APE]):**

Click or tap here to enter text.

**Has the APE been previously surveyed for archaeological historic properties or properties of traditional religious and cultural significance to Indian tribes or Native Hawaiian organizations?**

Choose an item.

**If yes, please identify report:** Click or tap here to enter text.

**Your Name:** Click or tap here to enter text.

**Title:** Click or tap here to enter text.

**E-mail address:** Click or tap here to enter text.

**Phone number:** Click or tap here to enter text.

**Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Continuation Sheet:** Click or tap here to enter text.

*This section to be completed by VA’s Federal Preservation Officer (FPO)*

**Historic Property Verification:**

**Date of VA FPO Verification:** Click or tap here to enter text.

**APE is appropriate:** Choose an item.

Click or tap here to enter text. **Are there historic properties present within the APE?:** Choose an item.Click or tap here to enter text.

**Historic Status:** Click or tap here to enter text.

**Additional Comments:** Click or tap here to enter text.

**This project may follow the steps set forth in the U.S. Department of Veterans Affairs Program Comment for Vacant and Underutilized Properties:**

[ ]  **approved**

[ ]  **not approved**

**If not approved, FPO comment:** Click or tap here to enter text.

**VA FPO Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_