

# ARKANSAS REGISTER



## Transmittal Sheet

Use only for **FINAL** and **EMERGENCY RULES**

Secretary of State

**Mark Martin**

500 Woodlane, Suite 026

Little Rock, Arkansas 72201-1094

(501) 682-5070

[www.sos.arkansas.gov](http://www.sos.arkansas.gov)



For Office

Use Only:

Effective Date \_\_\_\_\_ Code Number \_\_\_\_\_

Name of Agency Department of Arkansas Heritage

Department \_\_\_\_\_

Contact Rebecca Burkes E-mail rebecca.burkes@arkansas.gov Phone 501-324-9150

Statutory Authority for Promulgating Rules ACA 25-15-203 / 25-3-101

Rule Title: Department of Arkansas Heritage Historical Marker Program

Intended Effective Date

(Check One)

Date

☐ Emergency (ACA 25-15-204)

Legal Notice Published ..... 06/11/2017

☐ 10 Days After Filing (ACA 25-15-204)

Final Date for Public Comment ..... 07/17/2017

☐ Other  
(Must be more than 10 days after filing date.)

Reviewed by Legislative Council ..... 09/12/2017

Adopted by State Agency ..... 11/01/2017

Electronic Copy of Rule e-mailed from: (Required under ACA 25-15-218)

Contact Person

E-mail Address

Date

### CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted  
In Compliance with the Arkansas Administrative Act. (ACA 25-15-201 et. seq.)

Rebecca Burkes  
Signature

501 324 9150  
Phone Number

rebecca.burkes@arkansas.gov  
E-mail Address

Deputy Director, DAM  
Title

10/12/2017  
Date

FILED  
AR REGISTER DIV.  
2017 OCT 12 PM 2:58  
BY  
MARK MARTIN  
SECRETARY OF STATE  
STATE OF ARKANSAS

**QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS  
WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE**

DEPARTMENT/AGENCY Department of Arkansas Heritage  
DIVISION \_\_\_\_\_  
DIVISION DIRECTOR DAH Director: Stacy Hurst  
CONTACT PERSON Stephanie Wade  
DEPARTMENT/AGENCY Department of Arkansas Heritage  
ADDRESS 1100 North Street, Little Rock, AR 72201  
PHONE NO. 501-324-9150 FAX NO. 501-324-9154 EMAIL stephanie.wade@arkansas.gov  
NAME OF PRESENTER AT COMMITTEE MEETING Stephanie Wade  
PRESENTER E-MAIL stephanie.wade@arkansas.gov

**INSTRUCTIONS**

- A. Please make copies of this form for future use.
- B. Please answer each question **completely** using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

Donna K. Davis  
Administrative Rules Review Section  
Arkansas Legislative Council  
Bureau of Legislative Research  
One Capitol Mall, 5<sup>th</sup> Floor  
Little Rock, AR 72201

LEGISLATIVE COUNCIL

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1. What is the short title of this rule? DAH Historical Marker Program Guidelines
2. What is the subject of the proposed rule? The rule contains guidelines for administering the historical marker program, how to apply, how applications are evaluated and the timeline for decision.
3. Is this rule required to comply with a federal statute, rule, or regulation? Yes ☐ No ☒  
If yes, please provide the federal rule, regulation, and/or statute citation. \_\_\_\_\_
4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes ☐ No ☒  
If yes, what is the effective date of the emergency rule? N/A

When does the emergency rule expire? N/A

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act? Yes ☐ No ☐

5. Is this a new rule? Yes ☒ No ☐

If yes, please provide a brief summary explaining the regulation.

The rule seeks to establish guidelines under which the DAH Historical Marker Program will operate. Applications are voluntary.

Does this repeal an existing rule? Yes ☐ No ☒

If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. \_\_\_\_\_

Is this an amendment to an existing rule? Yes ☐ No ☒

If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. ACA 25-15-203 / ACA 25-3-101

7. What is the purpose of this proposed rule? Why is it necessary? The rule establishes the guidelines and process for the administration of a historical marker program. Applications are voluntary.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b). www.arkansasheritage.com

9. Will a public hearing be held on this proposed rule? Yes ☐ No ☒

If yes, please complete the following:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)

( 30 days after filing with Legislative Council ) July 17, 2017

11. What is the proposed effective date of this proposed rule? (Must provide a date.)

August 1, 2017

12. Do you expect this rule to be controversial? Yes ☐ No ☒

13. If yes, please explain. \_\_\_\_\_

14. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known.

\_\_\_\_\_

## FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT Department of Arkansas Heritage  
DIVISION \_\_\_\_\_  
PERSON COMPLETING THIS STATEMENT Stephanie Wade  
TELEPHONE NO. 501-324-9150 FAX NO. 501 324-9154 EMAIL: stephanie.wade@arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE DAH Historical Marker Program Guidelines

1. Does this proposed, amended, or repealed rule have a financial impact? Yes ☐ No ☒
2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule? Yes ☒ No ☐
3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes ☒ No ☐

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;

\_\_\_\_\_

- (b) The reason for adoption of the more costly rule;

\_\_\_\_\_

- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;

\_\_\_\_\_

- (d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.

\_\_\_\_\_

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

- (a) What is the cost to implement the federal rule or regulation?

**Current Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \_\_\_\_\_

Total \_\_\_\_\_

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_  
  
Total \_\_\_\_\_

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_  
  
Total \_\_\_\_\_

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

**Current Fiscal Year**

\$ 0

**Next Fiscal Year**

\$ 0

6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

\$ 0

**Next Fiscal Year**

\$ 0

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes ☐ No ☒

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
  - (a) justifies the agency's need for the proposed rule; and

- (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
  - (a) the rule is achieving the statutory objectives;
  - (b) the benefits of the rule continue to justify its costs; and
  - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.

## **Rule Summary**

### **Arkansas Historical Marker Program Guidelines**

This rule creates guidelines and processes for the administration of historical marker program. The markers will commemorate the past by acknowledging historically significant people, places and events in Arkansas. Markers must be sponsored by civic groups and organization and not solely by individuals.

Legal Notice Ad

The Department of Arkansas Heritage is instituting a historical marker program.

The Department is accepting public comment on the grant application rules and procedures through July 17, 2017. Interested persons may review the rules online and email

comments to [info@arkansasheritage.com](mailto:info@arkansasheritage.com). The rules are located online at

[www.arkansasheritage.com](http://www.arkansasheritage.com). Written comments may be returned to Historical Marker Program, Department of Arkansas Heritage, 1100 North Street, Little Rock, AR 72201. Phone: (501) 324-9150.





THE DEPARTMENT OF ARKANSAS

HERITAGE

**ARKANSAS HISTORICAL MARKER  
PROGRAM GUIDELINES**

## **ARKANSAS HISTORICAL MARKER PROGRAM GUIDELINES**

The Arkansas Historical Marker Program, established in 2017 by the Department of Arkansas Heritage, is another way the department is fulfilling its mission to preserve and promote our state's valuable cultural and historic resources. The markers commemorate the past by acknowledging the historically significant people, places and events that have shaped our state and confirm the importance of educating the public about these Arkansas treasures. Even though national and state events are sure to be recognized in the marker program, local history is just as important and having communities come together in this endeavor is rewarding and beneficial for our state as a whole. The Historical Marker Program creates a visible and lasting tribute to our history, heritage, and shared identity as Arkansans.

Before completing your application, please read the following pages.

Send your application and all required documentation to:

**Arkansas Historical Marker Program  
Department of Arkansas Heritage  
1100 North Street  
Little Rock, AR 72201  
ATTN: Historical Marker Program Coordinator**

### **General Marker Criteria**

- In order for a historic person, place and event to be eligible for marker commemoration, the significance must have been attained at least 50 years ago. There are exceptions if the person, place or event is of extraordinary historical significance.
- No living person shall be commemorated.
- Markers must be sponsored by civic groups and organizations and not solely by individuals. If you are a private property owner and wish to apply for a marker to commemorate an event or person pertaining to your land, you may partner with a local organization (Chamber of Commerce, historical society, etc.)
- The application must go through the proper approval process as stated below with the Historical Marker Program Review Committee having the final approval on marker eligibility and text.
- Markers are the property of the State of Arkansas.
- All markers are manufactured by a vendor selected by the Department of Arkansas Heritage. The markers have the approximate dimensions of 42" wide x 30" high with a 7'

post and 1" lettering and a uniform design preselected by the Department of Arkansas Heritage.

- Cost of the marker is split 50/50 between the sponsor and the Department of Arkansas Heritage. See the application for current pricing details and a photo example. Additionally, a maintenance fee will be added to the total cost in order to supplement future repairs or replacement if the marker is damaged or destroyed. Regular maintenance of the marker, such as cutting the grass around marker, is the responsibility of the sponsor.
- Installation of the marker is the responsibility of the sponsor. The sponsor must have the location approved by the local or county public works and gain the proper permits if necessary. If the marker is to be installed by the Arkansas Department of Transportation, then see which district engineer to contact provided through the link on the application.
- Please notify the Historical Marker Program Coordinator when planning your dedication ceremony. The Department of Arkansas Heritage will promote the celebration and assist with unveiling the marker.

#### **How to Apply for a Historical Marker**

The historical marker application may be updated at the discretion of the Department of Arkansas Heritage to satisfy the needs of the program.

#### **DOWNLOAD APPLICATION HERE TO GET STARTED!**

**Put link here.....**

If you would prefer to have an application mailed to you, please contact the Historical Marker Program Coordinator at 501-324-9150.

**Remember.....the entire application must be completed. Make sure you.....**

**Obtain written and signed permission and/or any necessary city or county permits needed to install the marker.** These are to be from the landowner, local public works and/or city or county government. If the marker is to be placed on a state highway, US highway, or other state maintained right-of-way, please contact the Arkansas State Highway and Transportation Department district engineer (see link on application) for permit information.

**Map the marker location.** On a copy of a city, county, USGS topographic map or a sketch map, indicate the marker's proposed location. Be sure to include cross streets and a north arrow. Indicate where visitors may park to read the marker. Photograph the proposed marker location.

**Include copies of your primary sources to support the marker text.** Create a list of facts and copy the relevant pages of the supporting documentation. Label each page with the fact number it represents and the complete citation.

### **Additional Information on Documenting Marker Facts**

Each application must be supported by primary sources such as letters and diaries, deeds, census records, tax records, court records, contemporary newspaper accounts, photographs. Primary sources may be supplemented with secondary sources including National Register of Historic Places or Arkansas Register of Historic Places nomination forms, county histories, biographies, and reports of cultural resource investigations and archaeological investigations. The Program Review Committee determines if the secondary sources submitted are acceptable.

Please send only copies of your primary and secondary documents as these submitted materials will not be returned. Label each copy with the number of the fact documented and the complete citation (see citation requirements below). If copies are made from microfilm, include the roll number in the citation. If you have any questions regarding documentation or how to cite a source, contact the Historical Marker Program Coordinator.

### **Citations**

- Book—author, title, publisher, publisher city and state, date published, page number.
- Newspaper—name of newspaper, name of article, author (if given), date, page number.
- Journal article—name of journal, name of article, author, volume and number, month, year, page number.
- Letter—name of writer and who the letter was written to, date the letter was written, the name of the collection, the name of the college, library, museum, etc. where the collection is located.
- Manuscript—name of the writer/creator, date, the name of the collection, the name of the college, library, museum, etc. where the collection is located.
- Government record—name and type of record (tax, deed, census, etc.), date, book and page number (if applicable), the name of the courthouse, college, library, museum, etc. where the documents are located.

### **Application Approval Process**

- Marker application and all supporting documents (copies of primary sources and location map) should be sent by the sponsor group to the Historical Marker Program Coordinator who verifies that all required documentation with citations is complete. If the application is incomplete, then the Coordinator will return materials to the sponsor detailing needed information. If the application is complete, then the Coordinator gives the materials to the Program Review Committee for thorough examination.
- The Program Review Committee consists of the Program Coordinator, an Arkansas Historic Preservation Program representative, the State Historian or designee, and two additional Arkansas history academics appointed by the Director of the Department of Arkansas Heritage. Once it is determined that the proposed marker is eligible, then the marker text will be drafted. The sponsor will be sent a copy for review of text accuracy only.
- Once the sponsor receives the proposed text, any comments or changes must be returned within 30 days or the application will be considered void. If the Program Review Committee declines to make the changes submitted by the sponsor, the sponsor can accept the initial text or withdraw the marker application. Final approval of marker text rests with the Program Review Committee.
- Once final marker approval notification has been given by the Program Review Committee, then the sponsor's half of marker payment and the additional maintenance fee will be requested. Marker price includes prepaid delivery to anywhere in Arkansas. This amount must be sent within 30 days of receipt of final approval. Marker will be ordered after payment is received with delivery time depending on the marker vendor.
- Marker will be shipped by vendor to sponsor group/organization address (no private residences). Once the marker is delivered, the sponsor can then make the necessary arrangements for installation and begin planning the dedication ceremony.
- Dedication ceremonies offer a wonderful way to present the history that the marker commemorates to the community, both to those present at the unveiling and to the larger community through press coverage. These ceremonies are a chance to honor the sponsor, have the participation of local officials and media, and celebrate the uniqueness and importance of our state. The Department of Arkansas Heritage will promote the event, and, schedule permitting, a representative of the Department of Arkansas Heritage will attend the dedication and deliver a short address.

The Arkansas Historical Marker Program is funded by the one-eighth cent conservation tax which is a limited source shared by many programs. Applications will be funded only as funds are available. Not every application can be funded.

**ARKANSAS HISTORICAL MARKER PROGRAM  
APPLICATION**

Please read the guidelines before filling out the application. If you have any questions, please contact the Historical Marker Program Coordinator.

Submit your completed application to:

**Arkansas Historical Marker Program  
Department of Arkansas Heritage  
1100 North Street  
Little Rock, AR 72201  
ATTN: Program Coordinator**

**Sponsor Information**

Name of organization submitting the application		
Mailing address (street address or P.O. Box)		
City	State <div style="text-align: center;">Arkansas</div>	Zip + 4
Contact name		
Mailing address (street address or P.O. Box)		
City	State <div style="text-align: center;">Arkansas</div>	Zip + 4
Daytime phone	Email address	Fax
<p>Statement of Responsibility: The sponsor agrees to donate money to the State of Arkansas for half the cost of the manufacture of a historical marker as described in this application (plus a one-time maintenance fee if the marker is damaged or destroyed) and agrees to install and maintain the marker as required by the State of Arkansas. The sponsor recognizes that the marker is owned by the State of Arkansas and makes no claims to ownership of the marker.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 60%; border-top: 1px solid black; min-height: 20px;"></div><div style="width: 35%; border-top: 1px solid black; min-height: 20px;"></div></div>		
Name of authorized representative		Title
I do _____ do not _____ (check one) want to apply for grant money _____ for my half of this marker. Funds may be available from the Department of Arkansas Heritage.		

**General Marker Information**

Subject of the proposed marker	
Briefly state why this subject is significant to Arkansas history	
Will the marker be placed on a site listed in the National Register of Historic Places?	Will the marker be placed on a site listed in the Arkansas Register of Historic Places?
Will your marker have the same text on both sides or different text on each side?	

**Marker Location Information**

The marker must be accessible to the public and have safe parking nearby.

Address
Describe the location, including cross streets
Is this site accessible to those with physical limitations?
Is there safe automobile parking within 100 feet of the proposed location?
Please attach a map showing the proposed location. The map may be a city or county map, a USGS topographic map, or a sketch map.  Be sure to indicate major cross streets and include a north arrow.
Please attach a photograph of the proposed location.

**Marker Installation Permission**

Is the proposed marker location on public property or private property?		
Owner name		
Owner mailing address (street address or P.O. Box)		
City	State	Zip + 4
Daytime phone		
If the site is on public property please provide the name and title of the person authorized to grant permission to install the marker.		
Daytime phone	Email address	
Is a permit necessary to install the marker?		
Has the necessary permit been obtained?		
Statement: I recognize that the historical marker is the property of the State of Arkansas and that the historical marker must remain where it was originally installed. I agree to the placement of the historical marker on my property and make no claim to ownership of the marker.		
_____ Owner or authorized representative signature		_____ Date

Note: If the marker is to be placed on a state highway, US highway, or other state maintained right-of-way you must contact the Arkansas State Highway and Transportation Department district engineer to obtain a permit before submitting the marker application.

Permits may also be necessary to install markers on city or county property or road rights-of-way. Please check with your city or county government to see if you need a permit to install the marker.



**Marker Delivery Information**

Provide a business address where the marker may be delivered between 8:00 a.m. and 5:00 p.m. weekdays. Residential addresses are unacceptable. Please note that someone must be on hand to accept delivery and to assist in unloading the marker and post.

Business name		
Street address		
City	State Arkansas	Zip + 4
Contact at address		
Contact phone number		

**Marker Payment Information**

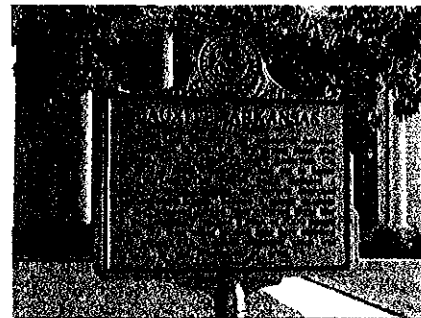
When your marker is approved you will receive notification from the Department of Arkansas Heritage as well as a statement for your half of the current cost of the marker including a \$200 one-time maintenance fee if the marker must be repaired or replaced. Payment instructions will accompany the statement. Total amount due must be submitted within 30 days of the notification. If payment is not received within 30 days, your application will be considered void.

**Pricing is subject to current market rates.**

**Current Pricing for Markers through May 1, 2018:**

Markers are 42" wide x 30" high with a 7' post and 1" lettering. Text is on both sides of the marker and can be the same text on each side or different text on each panel if a longer story is to be told. Marker cost includes prepaid delivery to anywhere in Arkansas.

Same text on each side:	\$1850.00
Different text on each side:	\$1950.00
Add one-time maintenance fee:	\$200.00



The photo is an example of the approved marker design with the Great Seal of the State of Arkansas at the top and the Department of Arkansas Heritage logo and marker sponsor name at the bottom of the text. Additionally, a QR (Quick Response) Code located in the lower corner allows you to scan the barcode with a smart device and immediately receive more pertinent information regarding that specific marker.

**Marker Text**

List the facts that you feel are important to include on the marker.

Remember — Space is limited. Include only the most important facts.

1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	

**Marker Text Documentation**

You must include photocopies of sources that verify the facts above. Please see the application guidelines for a description of the necessary documentation. Applications with information that is not properly documented will be returned.