



## Survey of Pierce County, Washington, Historical Records

Pierce County is initiating a countywide historical document survey project to locate and catalog significant historic documents relevant to Pierce County history. The project will then gather that information into a centralized database, which will be made available to the public via the Pierce County Library system. The study anticipates that historical documents of interest will both be housed in public repositories and be held by private individuals and organizations. Documents of interest include but are not limited to photographs; commercial, public, governmental, and institutional records; maps, surveys, and plats; birth and death records; scrapbooks, newspaper clippings, magazine articles, notebooks, diaries, correspondence, family reminiscences, oral history, recordings; architectural drawings, and more. Historical Research Associates, Inc. (HRA) has been selected by Pierce County Landmarks and Historic Preservation Commission to conduct this countywide document survey. If you have historical documents you would like to see included in the Pierce Countywide Historical Document Survey, please submit the following form to Julia Park, Pierce County Historic Preservation Officer, at [jpark@co.pierce.wa.us](mailto:jpark@co.pierce.wa.us).

### I. Repository Information

1. Catalogue No. (to be assigned by Pierce County): \_\_\_\_\_

2. Repository Name (or private individual/family name):

\_\_\_\_\_

3. Mailing Address:

Street 1 (or P.O. Box): \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_

County: \_\_\_\_\_

Zip Code: \_\_\_\_\_

4. Physical Address (if different from above):

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_

County: \_\_\_\_\_

Zip Code: \_\_\_\_\_

5. Alternate Address (if this is a family collection, please provide an alternate address in case of death or address change):

Street 1: \_\_\_\_\_

Street 2: \_\_\_\_\_

City: \_\_\_\_\_

County: \_\_\_\_\_

Zip Code: \_\_\_\_\_

6. Web Address of Home Page (URL):

\_\_\_\_\_

7. E-mail address (if this is a family collection, please provide alternate contact information):

\_\_\_\_\_

8. Phone number (if this is a family collection, please provide alternate contact information):

\_\_\_\_\_

9. Fax Number:

\_\_\_\_\_

10. Hours:

Monday: \_\_\_\_\_

Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_

Thursday: \_\_\_\_\_

Friday: \_\_\_\_\_

Saturday: \_\_\_\_\_

Sunday: \_\_\_\_\_

11. Appointments? (check one):

Not needed: \_\_\_\_\_

Recommended: \_\_\_\_\_

Required: \_\_\_\_\_

12. Which of the following BEST describes your organization (please circle one OR circle no more than three of the choices below which best represent your institution)?

Archives

College or University

Historical Society

Library

Museum

Private Collection

Other (please specify) \_\_\_\_\_

**II. Collection Information (please fill out separately for EACH collection)**

13. What is the title of your collection?

\_\_\_\_\_

14. What is the date range of your holdings (enter a 4-digit year for each or "present" if applicable)?

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

Latest Date (for current materials enter "present"): \_\_\_\_\_

15. What is the approximate size of your collection, in cubic feet (c.f.) or linear feet (l.f.)? (Please specify measurement type.)

\_\_\_\_\_

16. Briefly describe the contents and scope of your collections:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Please circle the types of historical media your organization currently holds: (circle all that apply)

Paper Records

Photographs

Architectural Drawings

Maps, Plats

Sound Recordings

Video Tapes

Motion Picture Film

Microfilm/Microfiche

Computer Media

Optical Disks

Art Objects (paintings, sculpture, ceramics, etc.)

Artifacts (archaeological, historical, etc.)

Vertical Files

Other (please specify) \_\_\_\_\_

18. Please name one or more subject areas that are particularly strong in this collection:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Access restrictions? (check one):

In-house only:\_\_\_\_\_ By appointment:\_\_\_\_\_ No limitations:\_\_\_\_\_

20. Please describe the current condition of your collection (check all that apply):

*Storage:*

Stored in acid-free containers:\_\_\_\_\_

Stored in temperature and humidity controlled environment:\_\_\_\_\_

*Inventory control:*

Has a collection list or inventory:\_\_\_\_\_

*Physical conditions:*

Discolored:\_\_\_\_\_ Brittle:\_\_\_\_\_ Torn:\_\_\_\_\_ Water damaged:\_\_\_\_\_ Newsprint:\_\_\_\_\_

Dirt/Dust/Stains:\_\_\_\_\_ Faded:\_\_\_\_\_ No damage/deterioration:\_\_\_\_\_

21. If this is an “out of custody” collection (in other words, not housed in an archive, library, museum, or other historical repository), please describe any restrictions you wish to place on the collection upon its donation to a repository.

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Thank you for your assistance in creating a complete database of Pierce County, Washington, historical records.