

**NATIONAL REGISTER OF HISTORIC PLACES  
INVENTORY - NOMINATION FORM**

(Type all entries - complete applicable sections)

|                              |                    |
|------------------------------|--------------------|
| STATE:<br><b>Mississippi</b> |                    |
| COUNTY:<br><b>Adams</b>      |                    |
| FOR NPS USE ONLY             |                    |
| ENTRY NUMBER                 | DATE               |
|                              | <b>SEP 17 1974</b> |

|                                          |  |
|------------------------------------------|--|
| <b>1. NAME</b>                           |  |
| COMMON:<br><b>Site of Fort Dearborn</b>  |  |
| AND/OR HISTORIC:<br><b>Fort Dearborn</b> |  |

|                    |                         |
|--------------------|-------------------------|
| <b>2. LOCATION</b> |                         |
| <b>Mississippi</b> |                         |
| CODE<br><b>28</b>  | COUNTY:<br><b>Adams</b> |
|                    | CODE<br><b>001</b>      |

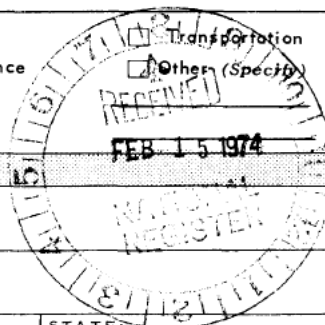
|                                                                                                                                                                                       |                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>3. CLASSIFICATION</b>                                                                                                                                                              |                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                          |
| CATEGORY<br>(Check One)                                                                                                                                                               | OWNERSHIP                                                                                                                                          | STATUS                                                                                                                                                   | ACCESSIBLE<br>TO THE PUBLIC                                                                                                                              |
| <input type="checkbox"/> District <input type="checkbox"/> Building<br><input checked="" type="checkbox"/> Site <input type="checkbox"/> Structure<br><input type="checkbox"/> Object | <input type="checkbox"/> Public<br><input checked="" type="checkbox"/> Private<br><input type="checkbox"/> Both                                    | Public Acquisition:<br><input type="checkbox"/> In Process<br><input type="checkbox"/> Being Considered                                                  | <input type="checkbox"/> Occupied<br><input checked="" type="checkbox"/> Unoccupied<br><input type="checkbox"/> Preservation work<br>in progress         |
| PRESENT USE (Check One or More as Appropriate)                                                                                                                                        |                                                                                                                                                    |                                                                                                                                                          |                                                                                                                                                          |
| <input type="checkbox"/> Agricultural<br><input type="checkbox"/> Commercial<br><input type="checkbox"/> Educational<br><input type="checkbox"/> Entertainment                        | <input type="checkbox"/> Government<br><input type="checkbox"/> Industrial<br><input type="checkbox"/> Military<br><input type="checkbox"/> Museum | <input type="checkbox"/> Park<br><input type="checkbox"/> Private Residence<br><input type="checkbox"/> Religious<br><input type="checkbox"/> Scientific | <input type="checkbox"/> Transportation<br><input type="checkbox"/> Other (Specify)<br><input checked="" type="checkbox"/> Comments<br><b>not in use</b> |

|                                    |                   |
|------------------------------------|-------------------|
| <b>4. OWNER OF PROPERTY</b>        |                   |
| OWNER'S NAME:<br><b>[REDACTED]</b> |                   |
| STR                                |                   |
| CITY                               |                   |
| STATE:<br><b>Mississippi</b>       | CODE<br><b>28</b> |

|                                                                                                |                              |
|------------------------------------------------------------------------------------------------|------------------------------|
| <b>5. LOCATION OF LEGAL DESCRIPTION</b>                                                        |                              |
| COURTHOUSE, REGISTRY OF DEEDS, ETC:<br><b>Adams County Courthouse, Chancery Clerk's Office</b> |                              |
| STREET AND NUMBER:                                                                             |                              |
| CITY OR TOWN:<br><b>Natchez</b>                                                                | STATE:<br><b>Mississippi</b> |
|                                                                                                | CODE<br><b>28</b>            |

|                                                                |                                                                                                                                           |
|----------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6. REPRESENTATION IN EXISTING SURVEYS</b>                   |                                                                                                                                           |
| TITLE OF SURVEY:<br><b>Natchez Trace Parkway Survey</b>        |                                                                                                                                           |
| DATE OF SURVEY: <b>1940</b>                                    | <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Local |
| DEPOSITORY FOR SURVEY RECORDS:<br><b>National Park Service</b> |                                                                                                                                           |
| STREET AND NUMBER:<br><b>801 19th Street, N.W.</b>             |                                                                                                                                           |
| CITY OR TOWN:<br><b>Washington</b>                             | STATE:<br><b>District of Columbia</b>                                                                                                     |
|                                                                | CODE<br><b>08</b>                                                                                                                         |

SEE INSTRUCTIONS



|                              |                         |                                    |      |
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| 7. DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                   |                                           |                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------|------------------------------------|
| CONDITION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (Check One)                                       |                                           |                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Excellent                | <input type="checkbox"/> Good             | <input type="checkbox"/> Fair      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Deteriorated             | <input checked="" type="checkbox"/> Ruins | <input type="checkbox"/> Unexposed |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (Check One)                                       |                                           | (Check One)                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Altered       | <input type="checkbox"/> Unaltered        | <input type="checkbox"/> Moved     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Original Site |                                           |                                    |
| DESCRIBE THE PRESENT AND ORIGINAL (if known) PHYSICAL APPEARANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   |                                           |                                    |
| <p>In 1802, Territorial Governor William C. C. Claiborne described the site of Fort Dearborn [REDACTED]</p> <p>[REDACTED]</p> <p>Claiborne also noted in another letter to Secretary of War Henry Dearborn that the site selected had "an ample supply of timber for the contemplated buildings and of firewood for the use of the garrison for several years."</p> <p>According to the Secretary of War, the fort was to be one hundred and forty feet square. The forty-three acres purchased for its erection was considered adequate enough to prevent the citizens from establishing tippling houses immediately in the vicinity of the fort.</p> <p>The site of Fort Dearborn is [REDACTED]</p> <p>[REDACTED]</p> <p>The fort was constructed of wood with the exception of the fireplaces which were brick.</p> <p>The site of Fort Dearborn has changed little since 1858, when Benjamin L. C. Wailes described it in his diary: "The outline of the barracks can be seen by scraps of nails, pieces of brick, fragments of glass, pottery and crockery and military buttons, etc. Here the British prisoners captured near New Orleans by General Jackson in 1815, were brought. It was then under command of Major Hayes G. White, and was soon after abandoned and dismantled."</p> |                                                   |                                           |                                    |



SEE INSTRUCTIONS

## 8. SIGNIFICANCE

PERIOD (Check One or More as Appropriate)

☐ Pre-Columbian☐ 16th Century☐ 18th Century☐ 20th Century☐ 15th Century☐ 17th Century☒ 19th Century

SPECIFIC DATE(S) (If Applicable and Known) 1802-1804

AREAS OF SIGNIFICANCE (Check One or More as Appropriate)

☐ Aboriginal☐ Education☐ Political☐ Urban Planning☐ Prehistoric☐ Engineering☐ Religion/Phi-☐ Other (Specify)☐ Historic☐ Industry

losophy

☐ Agriculture☐ Invention☐ Science☐ Architecture☐ Landscape☐ Sculpture☐ Art

Architecture

☐ Social/Human-☐ Commerce☐ Literature

itarian

☐ Communications☒ Military☐ Theater☐ Conservation☐ Music☐ Transportation

## STATEMENT OF SIGNIFICANCE

Fort Dearborn was established as a fortification for United States troops in 1802-1803, near the territorial capital of Washington, Mississippi. Events have associated the fort with the history of Mississippi's territorial period and the War of 1812. It was originally established as a guard for the territorial interior, but when the Louisiana Purchase extended America's frontier to the Gulf, the fort lost its military significance.

In 1802 the territorial governor, William C. C. Claiborne, petitioned Henry Dearborn, Secretary of War, and the individual for whom the fort was named, to erect a fortification [redacted] garrison it with troops from Fort Adams, [redacted]. Claiborne purchased the site, consisting of forty-three acres near the [redacted] at fifteen dollars per acre. The fort, constructed from indigenous timber, [redacted]

The Louisiana Purchase eliminated the need for the fort as a defensive post, and by 1813, ten years after its completion, the fort had fallen to such a state of deterioration that Andrew Jackson refused to quarter his Tennessee Volunteers there. Fort Dearborn, which had outlasted its usefulness, was dismantled after the Battle of New Orleans in 1815.



# 9. MAJOR BIBLIOGRAPHICAL REFERENCES

W.C.C. Claiborne Papers, Mississippi Department of Archives and History (Territorial Archives).

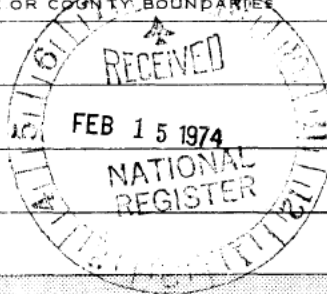
Mississippi Department of Archives and History. "Report of an Investigation to Establish the Site of Fort Dearborn, Washington, Adams County, Mississippi." Unpublished research report, 1973.

Rowland, Dunbar, comp. and ed. The Mississippi Territorial Archives, 1798-1803. Nashville: Press of Brandon Printing Company, 1905.

\_\_\_\_\_, ed. Official Letter Books of W.C.C. Claiborne. 6 vols. Jackson: Mississippi Department of Archives and History, 1917.

LIST ALL STATES AND COUNTIES FOR PROPERTIES OVERLAPPING STATE OR COUNTY BOUNDARIES

|        |      |         |      |
|--------|------|---------|------|
| STATE: | CODE | COUNTY  | CODE |
| STATE: | CODE | COUNTY: | CODE |
| STATE: | CODE | COUNTY: | CODE |
| STATE: | CODE | COUNTY: | CODE |



## 11. FORM PREPARED BY

|                                                                       |                                 |                   |
|-----------------------------------------------------------------------|---------------------------------|-------------------|
| NAME AND TITLE:<br><b>William C. Wright, Historian</b>                |                                 |                   |
| ORGANIZATION<br><b>Mississippi Department of Archives and History</b> | DATE<br><b>January 31, 1974</b> |                   |
| STREET AND NUMBER:<br><b>P. O. Box 571</b>                            |                                 |                   |
| CITY OR TOWN:<br><b>Jackson,</b>                                      | STATE<br><b>Mississippi</b>     | CODE<br><b>28</b> |

## 12. STATE LIAISON OFFICER CERTIFICATION

## NATIONAL REGISTER VERIFICATION

As the designated State Liaison Officer for the National Historic Preservation Act of 1966 (Public Law 89-665), I hereby nominate this property for inclusion in the National Register and certify that it has been evaluated according to the criteria and procedures set forth by the National Park Service. The recommended level of significance of this nomination is:

National ☒ State ☒ Local ☒

Name

**Clayton B. Williard**

Title

**State Liaison Officer**

Date

**February 8, 1974**

I hereby certify that this property is included in the National Register.

**U. B. Rountree**  
Chief, Office of Archeology and Historic Preservation

Date

**9/7/74**

ATTEST:

**Wm. H. H. H.**  
Keeper of The National Register

Date

**9-16-74**

SEE INSTRUCTIONS

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INVENTORY - NOMINATION FORM**

(Continuation Sheet)

|                      |             |
|----------------------|-------------|
| STATE<br>Mississippi |             |
| COUNTY<br>Adams      |             |
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| ENTRY NUMBER         | DATE        |
|                      | SEP 17 1974 |

(Number all entries)

9.

B. L. C. Wailes Diary, Duke University (microfilm copy at Mississippi Department of Archives and History).

