



# CAMBRIDGE HISTORICAL COMMISSION

831 Massachusetts Avenue, 2<sup>nd</sup> Fl., Cambridge, Massachusetts 02139  
Telephone: 617 349 4683 TTY: 617 349 6112  
E-mail: histcomm@cambridgema.gov URL: www.cambridgema.gov/Historic

## APPLICATION FOR CERTIFICATE

- The undersigned hereby applies to the Cambridge Historical Commission for a Certificate of (check one box):  Appropriateness,  Nonapplicability, or  Hardship, in accordance with Chapter 40C of the Massachusetts General Laws and/or Chapter 2.78 of the Municipal Code.
- Address of property: 11 Story St #24 Cambridge 02138, Cambridge, Massachusetts
- Describe the proposed alteration(s), construction or demolition in the space provided below:  
(An additional page can be attached, if necessary).

Replacement of 14 double-hung windows on the second floor of the property. The existing windows are in a very poor state of disrepair + some inoperable. These existing windows will be replaced with Pella Architect Series windows and will replicate what is currently there with Brown Exterior cladding + simulated Divided Lites in a 6 over 1 Pattern. These are the exact same windows that were approved last year by the CHC at the same property.

I certify that the information contained herein is true and accurate to the best of my knowledge and belief.  
The undersigned also attests that he/she has read the statements printed on the reverse.

Name of Property Owner of Record: Feng Jia  
Mailing Address: 11 Story St #24 Cambridge MA 02138  
Telephone/Fax: 617-939-6894 E-mail: Fisherwindows.Paul@gmail.com

⇒ Signature of Property Owner of Record: \_\_\_\_\_  
(Required field; the application will not be considered complete without the property owner's signature)

Name of proponent, if not record owner: Paul Finnequin on her behalf  
Mailing Address: P.O. Box 550035 North Waltham MA 02455  
Telephone/Fax: 617-939-6894 E-mail: Fisherwindows.Paul@gmail.com

(for office use only):  
Date Application Received: 7/17/20 Case Number: 4363 Hearing Date: 8/6/2020  
Type of Certificate Issued: \_\_\_\_\_ Date Issued: \_\_\_\_\_



















