

## CAMBRIDGE HISTORICAL COMMISSION

831 Massachusetts Avenue,  $2^{\rm nd}$  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

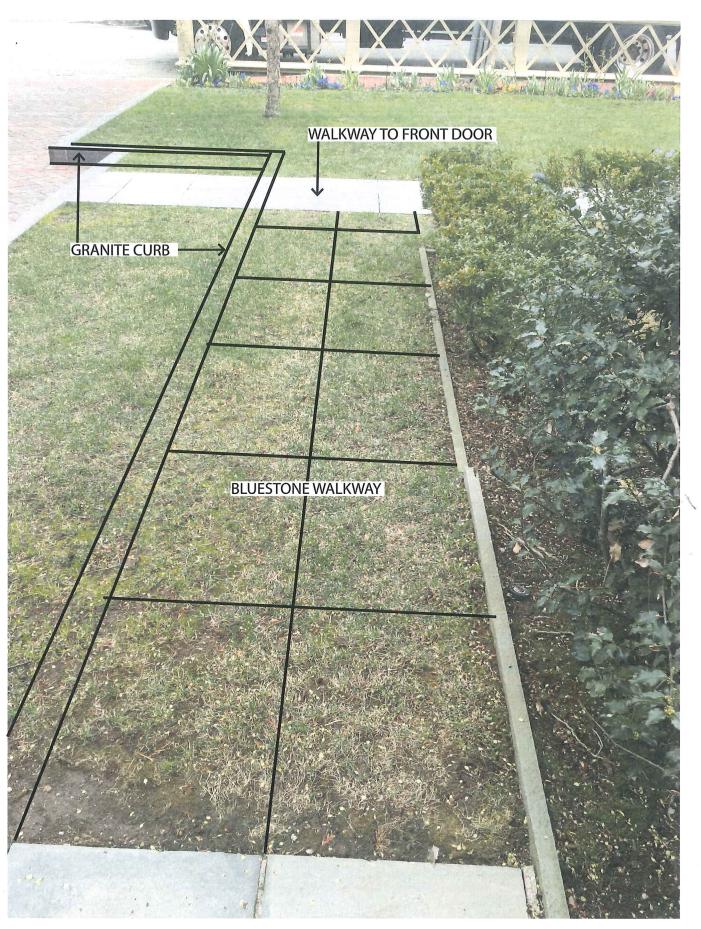
	Hardship, in accordance with ter 2.78 of the Municipal Code.
2. Address of property: 8 FOLLEN STREET	, Cambridge, Massachusetts
3. Describe the proposed alteration(s), construction or demolition (An additional page can be attached, if necessary).	in the space provided below:
The proposed alteration expands the brick driveway at the accommodate more space to ease vehicle flow. This alternative of brick driveway, 30 linear feet of granite curbing, and 50 Please see the attached plans and sketches of the proposed plans.	eration adds 100 square feet 0 square feet of bluestone.
I certify that the information contained herein is true and accurate to the best of The undersigned also attests that he/she has read the statements printed of	of my knowledge and belief. on the reverse.
Name of Property Owner of Record: Phillip T. Ragon and Susa	n M. Ragon
Mailing Address: 151 Tremont Street, Suite 110, PMB 397, E	Boston, MA 02111
Telephone/Fax: 617,742,2200 E-mail: Ca	they @ lACKGOGAN. COM
Signature of Property Owner of Record: \( \subseteq \subseteq \) (Required field: the application will not be considered complete without the p	Regorial Control of the Control of t
Name of proponent, if not record owner:	
Mailing Address:	
Telephone/Fax: E-mail:	
(for office use only):	Hearing Date: 6/6/19



A: SHIFT CURB 4'-6"TO ALIGN WITH PORCH POST AND EXPAND BRICK DRIVEWAY



B: EXTEND WALKWAY TO CONNECT WITH WALKWAY TO FRONT DOOR - VIEW TOWARD FRONT OF HOUSE



C: EXTEND WALKWAY TO CONNECT WITH WALKWAY TO FRONT DOOR - VIEW TOWARD FOLLEN STREET

