



CAMBRIDGE HISTORICAL COMMISSION

831 Massachusetts Avenue, 2nd 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: ⁶¹⁸⁻ 621-629 Cambridge St, Cambridge, Massachusetts
- Describe the proposed alteration(s), construction or demolition in the space provided below:
(An additional page can be attached, if necessary).

The proposed work to the building and proposed use at the above address takes place within the existing building and building envelope. The proposed use will change the existing retail, manufacturing, and residential use into office use.

Proposal for the 2-sty Barn Building (on the National Register) - Retain its street facade, but revise the ground floor windows and openings per the attached drawings. The side elevation will have changes to the window openings per the attached drawings. The rear portion will be rebuilt and will house a new egress stair.

Proposal for the 1-story portion of the building (on the National Register) - Rebuild in place, but also reduced in footprint approximately 574-sf to create an entry courtyard on the street side and also a patio at the rear per the attached drawings.

Proposal for the 1-story commercial structure (not on the National Register) - Install new windows in existing openings along the street facade. Install new windows in new openings at the rear elevation per the attached drawings.

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: RPI CAMBRIDGE STREET LLC

Mailing Address: 27 MITA LN #201, WELLSLEY, MA 02481

Telephone/Fax: 617 285 4337 E-mail: BLEVY@RIVEASIDEPROP.COM

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

Name of proponent, if not record owner: _____

Mailing Address: _____

Telephone/Fax: _____ E-mail: _____

(for office use only):

Date Application Received: 7/13/21 RECEIVED Case Number: 4631 Hearing Date: 8/5/21

Type of Certificate Issued: _____ Date Issued: _____

JUL 13 2021

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