



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

RECEIVED

SEP 10 2018

APPLICATION FOR CERTIFICATE

1. 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.

2. Address of property: 112 Pacific Street and 116 Brookline Street, Cambridge, Massachusetts

3. Describe the proposed alteration(s), construction or demolition in the space provided below: (An additional page can be attached, if necessary).

The proposed alterations to the building at 116 Brookline Street primarily aim to restore original window openings, replace the blank CMU façade facing Tudor Street and Sydney Street, preserve projected sign on Brookline Street, and construct accessible means of egress as required by life safety code. Please see the attached documents for a full list of alterations.

At this time, there are no plans for changes to the buildings at 112 Pacific Street, which include the one-story Metropolitan Ice Company masonry building and a one-story wood-framed shed. A pad-mounted transformer will be installed at the southernmost corner of the property as a primary electrical service to 116 Brookline Street. Please see site plan G-002 for location. All existing structures at 112 Pacific Street will remain, except for areas where limited demolition is required to accommodate new code required exit egress from 116 Brookline Street.

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:	Ledgemoor, LLC		
Mailing Address:	50 Church Street, Cambridge MA, 02138, 5th Floor		
Telephone/Fax:	617-354-0835	E-mail:	jdigiovanni@trinityproperty.com
Signature of Property Owner of Record:	<i>John P. DeLuca</i>		
(Required field; application will not be considered complete without property owner's signature)			
Name of proponent, if not record owner:			
Mailing Address:			
Telephone/Fax:		E-mail:	

<i>(for office use only):</i>			
Date Application Received:	9/10/18	Case Number:	4000
Hearing Date:	10/4/18	Type of Certificate Issued:	
Date Issued:			