



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

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: , Cambridge, Massachusetts

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

Harvard seeks approval to temporarily utilize the southern portion of the site at 27 Holyoke Place for construction support of the Adams House - Randolph Hall comprehensive renewal project. This supplements the existing construction trailer along Mt. Auburn Street which CHC has previously approved. The requested space will be used for laydown and materials storage and other construction support. The construction fence with the scrim enclosing the site will remain. The requested use of the site would last through December 2022. Upon completion, Harvard will remove the construction support infrastructure and return the site to its previous condition.

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:	<input type="text" value="President and Fellows of Harvard College"/>		
Mailing Address:	<input type="text" value="c/o Alexandra Offiong, Harvard Planning Office, 1350 Mass Ave, Cambridge, MA 02138"/>		
Telephone/Fax:	<input type="text" value="617-384-8155/ 617-495-0559"/>	E-mail:	<input type="text" value="alexandra_offiong@harvard.edu"/>
Signature of Property Owner of Record:	<input type="text" value="Alexandra Offiong"/>		
<small>(Required field; application will not be considered complete without property owner's signature)</small>			
Name of proponent, if not record owner:	<input type="text"/>		
Mailing Address:	<input type="text"/>		
Telephone/Fax:	<input type="text"/>	E-mail:	<input type="text"/>

<small>(for office use only):</small>			
Date Application Received:	<input type="text"/>	Case Number:	<input type="text"/>
		Hearing Date:	<input type="text"/>
Type of Certificate Issued:	<input type="text"/>	Date Issued:	<input type="text"/>

