

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

<ol> <li>The undersigned hereby applies to the Cambridge Historical Commission for a Certificate of (check one box):</li></ol>			
2.	2. Address of property: 56 Magazine st , Cambridge	ge, Massachusetts	
3.	3. Describe the proposed alteration(s), construction or demolition in the space provided below:  (An additional page can be attached, if necessary).		
I	We would like to erect a signage designating the property address and the name of the cl of the church. The company SignArt, indicates that the material used is fabricated and s manufactured to appear period appropriate so it should fit in with the historical appearance of the classical structure of the classical property address and the name of the cl of the church. The company SignArt, indicates that the material used is fabricated and s manufactured to appear period appropriate so it should fit in with the historical appearance of the classical structure of the close of the church is the church appearance of the close of the church is the church appearance of the close of the church is the church and accurate to the best belief. The undersigned also attests that he/she has read the statements period of the church is the church and accurate to the best belief. The undersigned also attests that he/she has read the statements period of the church is the church and accurate to the best belief.	of my knowledge and	
Name of Property Owner of Record: Christian Mission Pentecostal Tabernacle			
Mailing Address: 345 Washington st, Cambridge, MA, 02139			
	Telephone/Fax: 617 661 0222 E-mail: mail@ptspice.org	and we also the country of the count	
~	Signature of Property Owner of Record:  (Required field; application will not be considered complete without property owner's signated to the considered complete with the co	er der er e	
Name of proponent, if not record owner: Kenrith Plummer			
Mailing Address: 345 Washington st, Cambridge, MA 02139			
	Telephone/Fax: 857 274 5236 E-mail: facilities@ptspice	e.org	
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(	(for office use only):  Date Application Received: Case Number: Hearing	Date: 8 7/25	
I	Type of Certificate Issued: Date Issued:		
17	Type of Certificate Issued:		

## SINGLE SIDED NON-ILLUMINATED

This drawing is original artwork created and owned by SignArt, Inc. Any reproduction of this drawing or concept by any means, without written permission from SignArt, Inc. is strictly prohibited.



56 Magazine Street • Cambridge, MA 02139

We hereby submit specifications and estimates for:

## Manufacture and Install:

1 single sided non-illuminated exterior - monument sign

