



# CAMBRIDGE HISTORICAL COMMISSION

831 Massachusetts Avenue, 2<sup>nd</sup> Fl., Cambridge, Massachusetts 02139  
Telephone: 617 349 4683 Fax: 617 349 3116 TTY: 617 349 6112  
E-mail: histcomm@cambridgema.gov URL: http://www.cambridgema.gov/Historic

RECEIVED

JAN 13 2016

CAMBRIDGE HISTORICAL COMMISSION

## 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).

Renovate and relocate existing Carriage house on site and connect to existing house with single story addition (existing house to remain in current location). Renovate and repair existing house.

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:

Mailing Address:

Telephone/Fax:  E-mail:

Signature of Property Owner of Record: *Christian Nolen*  
(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:

(for office use only):

Date Application Received: 1/13/16 Case Number: 3544 Hearing Date: 2/4/16

Type of Certificate Issued: \_\_\_\_\_ Date Issued: \_\_\_\_\_