

CITY OF CAMBRIDGE
 MASSACHUSETTS
 BOARD OF ZONING APPEAL
 831 MASSACHUSETTS AVENUE
 CAMBRIDGE, MA 02139
 617 349-6100

BZA APPLICATION FORM

Plan No: BZA-017119-2019

GENERAL INFORMATION

The undersigned hereby petitions the Board of Zoning Appeal for the following:

Special Permit : _____ Variance : v Appeal : _____

PETITIONER : Clover Food Lab - C/O Ashley Jimenez, Sign Design

PETITIONER'S ADDRESS : 496 Massachusetts Avenue Cambridge, MA 02139

LOCATION OF PROPERTY : 496 Massachusetts Ave Cambridge, MA 02139

TYPE OF OCCUPANCY : _____ ZONING DISTRICT : Business B Zone/CSQ

REASON FOR PETITION :
Sign

DESCRIPTION OF PETITIONER'S PROPOSAL :

To install (1) double-sided internally illuminated sign to existing façade. Sign is only 7spft and has no wording on it.

SECTIONS OF ZONING ORDINANCE CITED :

Article 7.000 Section 7.16.22 (Signs).

Original Signature(s) :

Ashley Jimenez
 (Petitioner(s) / Owner)

Ashley Jimenez
 (Print Name)

Address : 170 Liberty Street
Brookton, MA 02301

Tel. No. : 508-580-0094

E-Mail Address : ashley.jimenez@sign
design.com

Date : May 10 2019

BZA APPLICATION FORM

DIMENSIONAL INFORMATION

APPLICANT: Sign Design PRESENT USE/OCCUPANCY: Retail/Office
 LOCATION: 496 Massachusetts Ave Cambridge, MA 02139 ZONE: Business B Zone/CSQ
 PHONE: _____ REQUESTED USE/OCCUPANCY: Retail/Office

	<u>EXISTING CONDITIONS</u>	<u>REQUESTED CONDITIONS</u>	<u>ORDINANCE REQUIREMENTS</u> ¹
<u>TOTAL GROSS FLOOR AREA:</u>	na	na	(max.)
<u>LOT AREA:</u>	na	na	(min.)
<u>RATIO OF GROSS FLOOR AREA TO LOT AREA: 2</u>	na	na	(max.)
<u>LOT AREA FOR EACH DWELLING UNIT:</u>	na	na	(min.)
<u>SIZE OF LOT:</u>			
WIDTH	na	na	(min.)
DEPTH	na	na	
<u>SETBACKS IN FEET:</u>			
FRONT	na	na	(min.)
REAR	na	na	(min.)
LEFT SIDE	na	na	(min.)
RIGHT SIDE	na	na	(min.)
<u>SIZE OF BLDG.:</u>			
HEIGHT	na	na	(max.)
LENGTH	na	na	
WIDTH	na	na	
<u>RATIO OF USABLE OPEN SPACE TO LOT AREA:</u>	na	na	(min.)
<u>NO. OF DWELLING UNITS:</u>	na	na	(max.)
<u>NO. OF PARKING SPACES:</u>	na	na	(min./max)
<u>NO. OF LOADING AREAS:</u>	na	na	(min.)
<u>DISTANCE TO NEAREST BLDG. ON SAME LOT:</u>	na	na	(min.)

Describe where applicable, other occupancies on same lot, the size of adjacent buildings on same lot, and type of construction proposed, e.g.; wood frame, concrete, brick, steel, etc.

The sign is 32"W x 32"H= 7sqft. Store frontage is 205.5"W x 181.5625"H. Sign is 149.625" off ground which is approx. 12ft

- SEE CAMBRIDGE ZONING ORDINANCE ARTICLE 5.000, SECTION 5.30 (DISTRICT OF DIMENSIONAL REGULATIONS).
- TOTAL GROSS FLOOR AREA (INCLUDING BASEMENT 7'-0" IN HEIGHT AND ATTIC AREAS GREATER THAN 5') DIVIDED BY LOT AREA.
- OPEN SPACE SHALL NOT INCLUDE PARKING AREAS, WALKWAYS OR DRIVEWAYS AND SHALL HAVE A MINIMUM DIMENSION OF 15'.

BZA APPLICATION FORM

SUPPORTING STATEMENT FOR A VARIANCE

EACH OF THE FOLLOWING REQUIREMENTS FOR A VARIANCE MUST BE ESTABLISHED AND SET FORTH IN COMPLETE DETAIL BY THE APPLICANT IN ACCORDANCE WITH MGL 40A, SECTION 10:

- A)** A Literal enforcement of the provisions of this Ordinance would involve a substantial hardship, financial or otherwise, to the petitioner or appellant for the following reasons:

Due to the size of the sign, we are requesting an internally illuminated sign for visibility and advertisement. The sign is only 7sqft and has not wording on it thus why we would like an illuminated sign.

- B)** The hardship is owing to the following circumstances relating to the soil conditions, shape or topography of such land or structures and especially affecting such land or structures but not affecting generally the zoning district in which it is located for the following reasons:

The sign is not big and the illumination is not a of a "flashing" nature. The sign will have a diming function and is high off the ground to avoid pedestrian or traffic issues.

- C) DESIRABLE RELIEF MAY BE GRANTED WITHOUT EITHER:**

- 1)** Substantial detriment to the public good for the following reasons:

Sign is not big. Diming functions will be provided for the sign. Sign is high enough of building so it will not affect pedestrian walk way.

- 2)** Relief may be granted without nullifying or substantially derogating from the intent or purpose of this Ordinance for the following reasons:

Small sign without wording and lighting is not bright and has diming function.

- *** If You have any questions as to whether you can establish all of the applicable legal requirements, you should consult with your own attorney.

32A-017119-2019

SIGN CERTIFICATION FORM

COMMUNITY DEVELOPMENT DEPARTMENT

Sign Text: I will only a picture of flower

Applicant (name and address) Clavier Po. a Lab
4916 Massachusetts Avenue

Signature [Handwritten Signature]

Telephone: _____ FAX: _____

Location of Premises: 4916 Massachusetts Avenue

Zoning District: PP-05A Overlay District: _____

Date Application Submitted: 4/5/19

Sketch of Sign Enclosed: Yes No

PLEASE NOTE: All signs must receive a permit from the Inspectional Services Department (ISD) before installation. Community Development Department (CDD) action does NOT constitute issuance of a permit or certification that all other code requirements have been met. Do not contract for the fabrication of a sign until all permits have been issued including approval from the City Council, if necessary (see below)!

Copies: ISD City Clerk* CDD Applicant Historical Com.

*Any sign or portion of a sign extending more than six (6) inches into the public sidewalk, must receive approval from the Cambridge City Council; a bond must be posted with the City Clerk. Forms for that approval are obtained at the Office of the City Clerk.

NOTE: PLEASE PROVIDE ALL REQUESTED INFORMATION FOR EACH SIGN PROPOSED. FAILURE TO DO SO WILL ONLY DELAY CERTIFICATION.

Proposed PROJECTING Sign (including signs on awnings)

Area in Square feet: 7.1 Dimensions: 32" x 32"

Illumination: Natural Internal External

Height (from ground to the top of the sign): 181 9/16" (15')

1. COMPLETE WHEN SIGN IS ACCESSORY TO A FIRST FLOOR STORE

Length in feet of store front facing street: (a) 205.5". Area of signs allowed accessory to store: outside (1 x a) 205.5, behind windows (0.5 x a) . Area of all existing signs on the store front to remain (including any freestanding sign): 7.1. Area of additional signs permitted: .

2. COMPLETE FOR ANY OTHER SIGN

Length in feet of building facade facing street: (a) . Area of signs allowed accessory to the building facade: outside (1 x a) , behind windows (0.5 x a) . Area of all existing signs on the building facade to remain (including any freestanding sign): . Area of additional signs permitted: .

SUMMARY OF LIMITATIONS FOR PROJECTING SIGNS (see reverse side for more general summary of the sign regulations; review Article 7.000 of the Zoning Ordinance for all zoning requirements.)

AREA: 13 square feet maximum. HEIGHT ABOVE THE GROUND: 20 feet but below the sills of second floor windows. ILLUMINATION: Natural or external only. NUMBER: one per store plus one per entry to the remainder of the building.

COMMUNITY DEVELOPMENT DEPARTMENT CERTIFICATION

Sign conforms to requirements of Article 7.000: YES NO

Sign requires a variance from the Board of Zoning Appeal: YES

Relevant sections: Section 7.16.22 Projecting Sign

COMMENTS: allow natural or external lighting
only

Date: 4/10/19 CDD Representative E. J. M. Proder

116810

Version 06
04.08.19

Clover Food Lab
495 Massachusetts Ave

SIGNDESIGN
170 Liberty Street
Brooklyn, MA 02301
508-580-0094

DESIGNED BY
Tom Hannon
DRAWN BY
Ashley Jimenez
CHECKED BY
Nyles Davaney
PROJECT
CW/DJB

SCALE 1:4

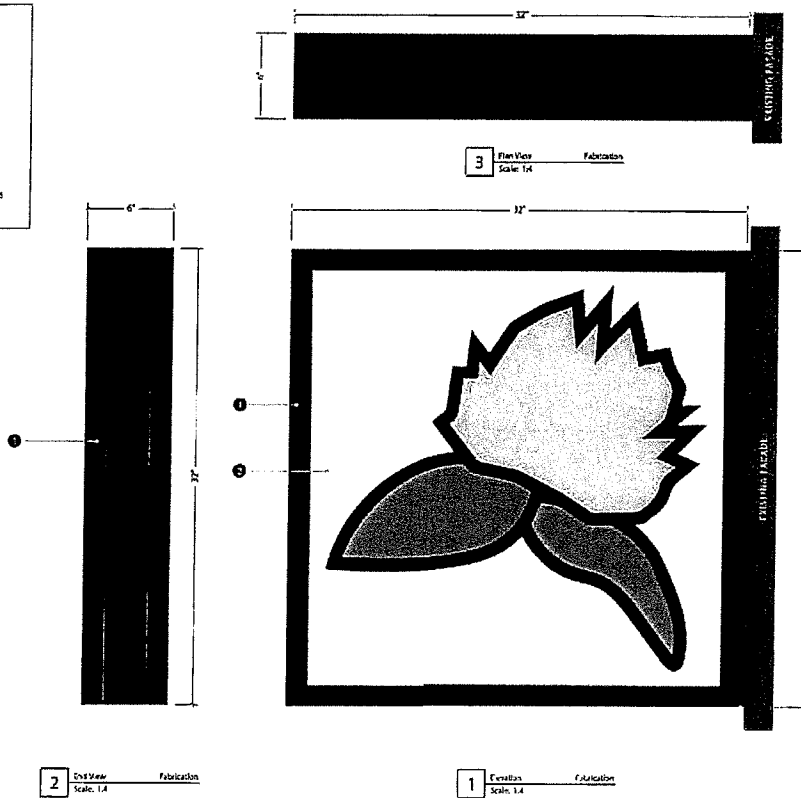
SHEET
01 of 03

Sign Design Inc. is not responsible for any errors or omissions in this drawing. The user of this drawing is responsible for obtaining all necessary permits and approvals. The user of this drawing is responsible for obtaining all necessary permits and approvals. The user of this drawing is responsible for obtaining all necessary permits and approvals.

Internally Illuminated Flagmounted Sign

Quantity: 1 Double-Sided

- 1 Internally Illuminated Sign Cabinet
(All Visible Painted Black with Sable Finish)
• Extruded Extrusion EC-9 Top/Bottom, ECR-9 Side
• 1.5" LF Moulding
• TetraMax Doubles LEDs; 24 Volt Power Supply
- 2 3/16" White Polycarbonate Face with Translucent Pressure-Sensitive Vinyl Graphics (Avery A7 Black, Trans PDC 108 Pink, Trans FDC 138 Lime Green or Digitally Printed (Lark) with 3M Luster Lamination)
- 3 Mechanically Fastened flush to facade with hex bolts and self-tappers



This sign is intended to be installed in accordance with the requirements of Article 600 of the National Electrical Code and/or other applicable local codes. This includes proper grounding and bonding of the sign.

116810

Version 05
04.08.19

Clover Food Lab
456 Massachusetts Ave



170 Liberty Street
Brockton, MA 02301
508-690-0094

Tom Hannon

Ashley Jimenez

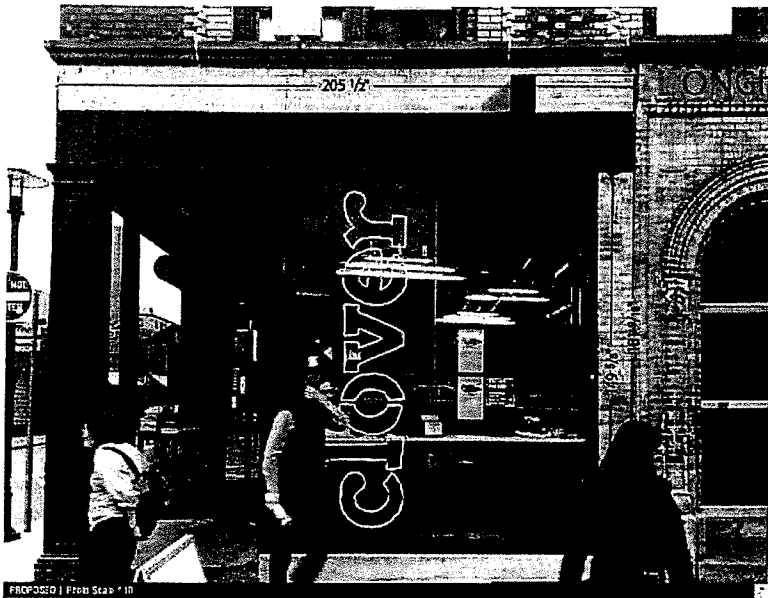
Myles DeVaney

CW/DJB

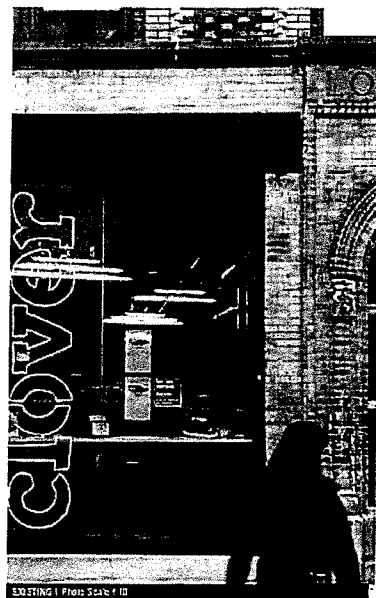
SCALE 1:19

SHEET
02 of 03

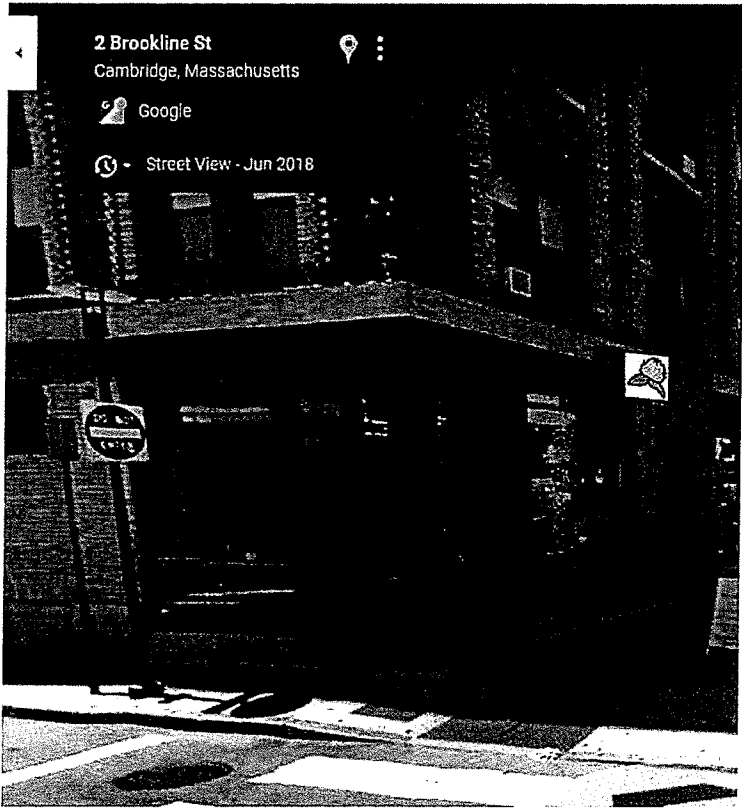
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PROPOSED | Photo Scale 1:19



EXISTING | Photo Scale 1:19



116810

Version 06
04.08.19

Clover Food Lab
495 Massachusetts Ave



170 Liberty Street
Brookline, MA 02301
508-580-0094

Tom Hannon

Ashley Jimenez

Myles Devaney

CW/DJB

SCALE 1:10

SHEET
03 of 03

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BOARD OF ZONING APPEAL (BZA)

PROCEDURES & APPLICATION

Table of Contents:

Procedure for BZA Petitions		Attachment A
BZA Application:		
Check List	(Attach. B, - pg. 1)	
General Information	(Attach. B, - pg. 2) (Need 3 forms w/original signatures)	
Ownership Information	(Attach. B, - pg. 3)	
Dimensional Data	(Attach. B, - pg. 4)	
Variance Information	(Attach. B, - pg. 5)	
Special Permit Information	(Attach. B, - pg. 6)	
Fee Schedule		Attachment C
Instructions for Posting Notice of Hearing		Attachment D
Historical Commission Coordination		Attachment E
Deviations from Approved Plans		Attachment F
Subdivision Information		Attachment G

BEFORE YOU BUY, OR RENT PROPERTY IN THE CITY OF CAMBRIDGE, CHECK ALL APPLICABLE LAWS AND REGULATIONS, INCLUDING THE CAMBRIDGE ZONING ORDINANCE TO BE SURE THAT THE PROPERTY CAN BE USED OR ALTERED FOR THE PURPOSE INTENDED.

(Revised: August 2012)

BZA APPLICATION FORM

CHECK LIST

PROPERTY LOCATION: 496 Massachusetts Ave DATE: 4.1.19
PETITIONER OR REPRESENTATIVE: Clover Food Lab
ADDRESS & PHONE: 700 Mass Ave Cambridge, MA
BLOCK: 91 LOT: 208

PLEASE CHECK THAT YOU HAVE INCLUDED THE FOLLOWING WITH YOUR APPLICATION. APPLICATIONS WILL NOT BE ACCEPTED FOR PROCESSING & SCHEDULING UNLESS ALL REQUIRED DOCUMENTS ARE PROVIDED.

PLEASE INCLUDE THIS CHECKLIST WITH YOUR APPLICATION. ALL DOCUMENTS ARE TO BE TYPED OR WRITTEN LEGIBLY.

<u>DOCUMENTS</u>	<u>REQUIRED</u>	<u>ENCLOSED</u>
Application Form	_____	✓
3 Forms with Original Signatures	_____	✓
Supporting Statements - Scanned & 1 set to Zoning	_____	✓
Application Fee (You will receive invoice online)	_____	✓
Assessor's GIS "Block Map" (Available on line or At Engineering Dept. - 147 Hampshire Street)	_____	✓
Dimensional Form - Refer to Cambridge Zoning Ordinance - Scanned & 1 set to Zoning (Subject to further review by Zoning Specialist)	_____	_____
Ownership Certificate, Notarized - Scanned & 1 set to Zoning	_____	✓
Floor Plans - Scanned & 1 set to Zoning	_____	✓
Elevations - Scanned & 1 set to Zoning	_____	_____
Certified Plot Plan - Scanned & 1 set to Zoning (By Registered Land Surveyor)	_____	_____
Photographs of Property - Scanned & 1 set to Zoning	_____	✓
Parking Plan (if relevant to your application) Scanned & 1 set to Zoning	_____	_____
<u>FOR SUBDIVISION ALSO INCLUDE:</u> Scanned & 1 set to Zoning		
Proposed Deeds	_____	_____
Evidence of Separate Utilities **	_____	_____
Proposed Subdivision Plan	_____	_____

Petitioners are advised to refer to Attachment A (Procedures for applying to the Board of Zoning Appeal) & consult zoning staff for review.
It is advisable for the Petitioner to discuss the petition with the abutters as listed in the Zoning BZA Case file.

* For Special Permits under Art. 4.32.G.1 (Communication Towers and Antennas), include a photo simulation.
** Can be submitted after subdivision has been approved.

BZA APPLICATION FORM - OWNERSHIP INFORMATION

To be completed by OWNER, signed before a notary and returned to The Secretary of the Board of Zoning Appeals.

I/We Michael P. Simon
(OWNER)

Address: 700 MASS AVENUE Cambridge, MA

State that I/We own the property located at 496 MASS AVENUE, which is the subject of this zoning application.

The record title of this property is in the name of Central Property Management LLC

*Pursuant to a deed of duly recorded in the date 3/6/14, Middlesex South County Registry of Deeds at Book 01025, Page 6; or Middlesex Registry District of Land Court, Certificate No. _____ Book _____ Page _____.

Michael P. Simon
SIGNATURE BY LAND OWNER OR AUTHORIZED TRUSTEE, OFFICER OR AGENT*

*Written evidence of Agent's standing to represent petitioner may be requested.

Commonwealth of Massachusetts, County of Middlesex

The above-name Michael P Simon personally appeared before me, this 4th of April, 2019, and made oath that the above statement is true.

Mary C. Greene Notary

My commission expires 2-5-21 (Notary Seal). MARY C. GREENE
Notary Public
Commonwealth of Massachusetts
My Commission Expires
February 5, 2021

- If ownership is not shown in recorded deed, e.g. if by court order, recent deed, or inheritance, please include documentation.

BZA APPLICATION FORM

GENERAL INFORMATION

The undersigned hereby petitions the Board of Zoning Appeal for the following:

Special Permit: _____ Variance: X Appeal: _____

PETITIONER: Clover Food Lab
PETITIONER'S ADDRESS: 700 MASS AVE Cambridge, MA 02139
LOCATION OF PROPERTY: 406 MASS AVE Cambridge, MA 02139
TYPE OF OCCUPANCY: RESTAURANT ZONING DISTRICT: BB-CSQ

REASON FOR PETITION:

- | | |
|---|--|
| <input type="checkbox"/> Additions | <input type="checkbox"/> New Structure |
| <input type="checkbox"/> Change in Use/Occupancy | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Conversion to Addi'l Dwelling Unit's | <input checked="" type="checkbox"/> Sign |
| <input type="checkbox"/> Dormer | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Other: _____ | |

DESCRIPTION OF PETITIONER'S PROPOSAL:

TO install (1) double-sided internally illuminated sign to existing facade

SECTIONS OF ZONING ORDINANCE CITED:

Article 7 Section Internal illumination is not allowed on projecting signs
Article _____ Section _____
Article _____ Section _____

Applicants for a Variance must complete Pages 1-5
Applicants for a Special Permit must complete Pages 1-4 and 6
Applicants for an Appeal to the BZA of a Zoning determination by the Inspectional Services Department must attach a statement concerning the reasons for the appeal

Original Signature(s): [Signature]
(Petitioner(s)/Owner)
NATE BERKOWITZ
(Print Name)
Address: 50 MILK ST FL16
BOSTON, MA 02109
Tel. No.: 513-210-8562
E-Mail Address: NATE@CLOVERFOODLAB.COM

Date: 4/1/19

BZA APPLICATION FORM

DIMENSIONAL INFORMATION

APPLICANT: Clover Food Lab PRESENT USE/OCCUPANCY: RESTAURANT

LOCATION: 4916 MASS AVENUE ZONE: _____

PHONE: _____ REQUESTED USE/OCCUPANCY: RESTAURANT

	<u>EXISTING</u> <u>CONDITIONS</u>	<u>REQUESTED</u> <u>CONDITIONS</u>	<u>ORDINANCE</u> <u>REQUIREMENTS</u> ¹
<u>TOTAL GROSS FLOOR AREA:</u>	_____	_____	_____ (max.)
<u>LOT AREA:</u>	_____	_____	_____ (min.)
<u>RATIO OF GROSS FLOOR AREA</u> <u>TO LOT AREA:</u> ²	_____	_____	_____ (max.)
<u>LOT AREA FOR EACH DWELLING UNIT:</u>	_____	_____	_____ (min.)
<u>SIZE OF LOT:</u>			
WIDTH	_____	_____	_____ (min.)
DEPTH	_____	_____	_____ (min.)
<u>Setbacks in</u> <u>Feet:</u>			
FRONT	_____	_____	_____ (min.)
REAR	_____	_____	_____ (min.)
LEFT SIDE	_____	_____	_____ (min.)
RIGHT SIDE	_____	_____	_____ (min.)
<u>SIZE OF BLDG.:</u>			
HEIGHT	_____	_____	_____ (max.)
LENGTH	_____	_____	_____ (min.)
WIDTH	_____	_____	_____ (min.)
<u>RATIO OF USABLE OPEN SPACE</u> <u>TO LOT AREA:</u> ³	_____	_____	_____ (min.)
<u>NO. OF DWELLING UNITS:</u>	_____	_____	_____ (max.)
<u>NO. OF PARKING SPACES:</u>	_____	_____	_____ (min./max)
<u>NO. OF LOADING AREAS:</u>	_____	_____	_____ (min.)
<u>DISTANCE TO NEAREST BLDG.</u> <u>ON SAME LOT:</u>	_____	_____	_____ (min.)

Describe where applicable, other occupancies on same lot, the size of adjacent buildings on same lot, and type of construction proposed, e.g.; wood frame, concrete, brick, steel, etc.

1. SEE CAMBRIDGE ZONING ORDINANCE ARTICLE 5.000, SECTION 5.30 (DISTRICT OF DIMENSIONAL REGULATIONS).
2. TOTAL GROSS FLOOR AREA (INCLUDING BASEMENT 7'-0" IN HEIGHT AND ATTIC AREAS GREATER THAN 5') DIVIDED BY LOT AREA.
3. OPEN SPACE SHALL NOT INCLUDE PARKING AREAS, WALKWAYS OR DRIVEWAYS AND SHALL HAVE A MINIMUM DIMENSION OF 15'.

BZA APPLICATION FORM

SUPPORTING STATEMENT FOR A VARIANCE

EACH OF THE FOLLOWING REQUIREMENTS FOR A VARIANCE MUST BE ESTABLISHED AND SET FORTH IN COMPLETE DETAIL BY THE APPLICANT IN ACCORDANCE WITH MGL 40A, SECTION 10:

- A) A Literal enforcement of the provisions of this Ordinance would involve a substantial hardship, financial or otherwise, to the petitioner or appellant for the following reasons:

Due to the size of the sign, we are requesting an internally illuminated sign for visibility and advertisement. Sign is only 7sq ft and has no wording on it. Thus why we want it illuminated.

- B) The hardship is owing to the following circumstances relating to the soil conditions, shape or topography of such land or structures and especially affecting such land or structures but not affecting generally the zoning district in which it is located for the following reasons:

The sign is not big or flashing.
The sign will have a dimming function
It is high off the ground so pedestrians or drivers will not be affected

- C) **DESIRABLE RELIEF MAY BE GRANTED WITHOUT EITHER:**

- 1) Substantial detriment to the public good for the following reasons:

Sign is not big or loud or flashing
It is also high enough to keep public way clear for walking

Dimming function

- 2) Relief may be granted without nullifying or substantially derogating from the intent or purpose of this Ordinance for the following reasons:

It's a small sign without wording
and lighting is not very bright and
has a dimming function

- * If You have any questions as to whether you can establish all of the applicable legal requirements, you should consult with your own attorney.



Workers Compensation And Employers Liability Insurance Policy
Coverage Is Provided In:

WC 00 00 01 A

The Ohio Casualty Insurance Company

Policy Number:
XWO (19) 55 41 27 08

Prior Policy Number:
XWO (18) 55 41 27 08

MA Risk ID 000232224

NCCI Co. No. 11363

Workers Compensation and
Employers Liability Insurance Policy
Information Page

ITEM 1: The Insured & Mailing Address

Agent Mailing Address & Phone No.

SIGN DESIGN INC
170 LIBERTY ST
BROCKTON, MA 02301

(508) 583-1106
ROGER KEITH & SONS INSURANCE
AGENCY INC
1575 MAIN ST
BROCKTON, MA 02301-7195

Individual Partnership

X Corporation or

FEIN: 043027262

NAICS339950

Other workplaces not shown above: 4910 Massachusetts Avenue 02139

ITEM 2 The policy period is from 12/01/2018 to 12/01/2019 12:01 am Standard Time at the insured's mailing address.

ITEM 3 A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of the states listed here: MA

B. Employers Liability Insurance: Part Two of the policy applies to work in each state listed in Item 3.A. The limits of our liability under Part Two are:

Bodily Injury by Accident	\$1,000,000	each accident
Bodily Injury by Disease	\$1,000,000	policy limit
Bodily Injury by Disease	\$1,000,000	each employee

C. Other States Insurance: Part Three of the policy applies to the states, if any, listed here: See Extension of Information Page

D. This policy includes these endorsements and schedules: See Policy Forms and Endorsements Summary

ITEM 4 The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All information required below is subject to verification and change by audit.

Classifications	Code No.	Premium Basis - Total Estimated Annual Remuneration	Rate per \$100 of Remuneration	Estimated Annual Premium
-----------------	----------	---	--------------------------------	--------------------------

See Extension of Information Page(s)

Total Estimated Annual Premium \$64,622.00

Total Surcharges and Assessments \$2,544.00

Minimum Premium \$575.00 MA Total Estimated Cost \$67,166.00

If indicated below, interim adjustments of premiums shall be made.

Deposit Premium \$67,166.00

Issue Date 12/03/18

Countersigned by: _____

To report a claim, call your Agent or 1-800-362-0000

WC 00 00 01 A (WC 30 10 E)

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Commonwealth of Massachusetts
Division of Professional Licensure
Board of Building Regulations and Standards
Construction Supervisor

CS-068112

Expires: 08/21/2020

RALPH R FERRIGNO, JR.
170 LIBERTY STREET
BROCKTON MA 02301



Commissioner

Construction Supervisor

Unrestricted - Buildings of any use group which contain less than 35,000 cubic feet (991 cubic meters) of enclosed space.

Failure to possess a current edition of the Massachusetts State Building Code is cause for revocation of this license.

**For information about this license
Call (617) 727-3200 or visit www.mass.gov/dpl**