



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

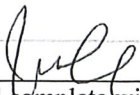
3. Describe the proposed alteration(s), construction or demolition in the space provided below:
(An additional page can be attached, if necessary).

Replace existing entry vestibule full view glass/wood door size as existing (36"x80") with a therma tru full view glass door (specifications attached).

Replace (12) single divided lite side lites, with thermo pane glass, with (6) lite bars in between glass at left and right of front entry door (glass size as existing 18"x71").

Replace vestibule (30) single divided lite window sash at left and right side of vestibule with thermo pane (6) lite bars in between glass (glass size as existing 51"x71").

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="Jeffrey Kripke"/>	
Mailing Address: <input type="text" value="12 Holly Lane Cohasset, MA 02025"/>	
Telephone/Fax: <input type="text" value="617-922-0313"/>	E-mail: <input type="text" value="jkldwk@gmail.com"/>
Signature of Property Owner of Record: 	
(Required field; application will not be considered complete without property owner's signature)	
Name of proponent, if not record owner: <input type="text" value="Mark Cabral"/>	
Mailing Address: <input type="text" value="80 Hacketts Pond Drive Hanover, MA 02339"/>	
Telephone/Fax: <input type="text" value="617-592-4634"/>	E-mail: <input type="text" value="markcabral@gmail.com"/>

(for office use only):			
Date Application Received: _____	Case Number: <u>4834</u>	Hearing Date: <u>8/4/22</u>	
Type of Certificate Issued: _____	Date Issued: _____		



2



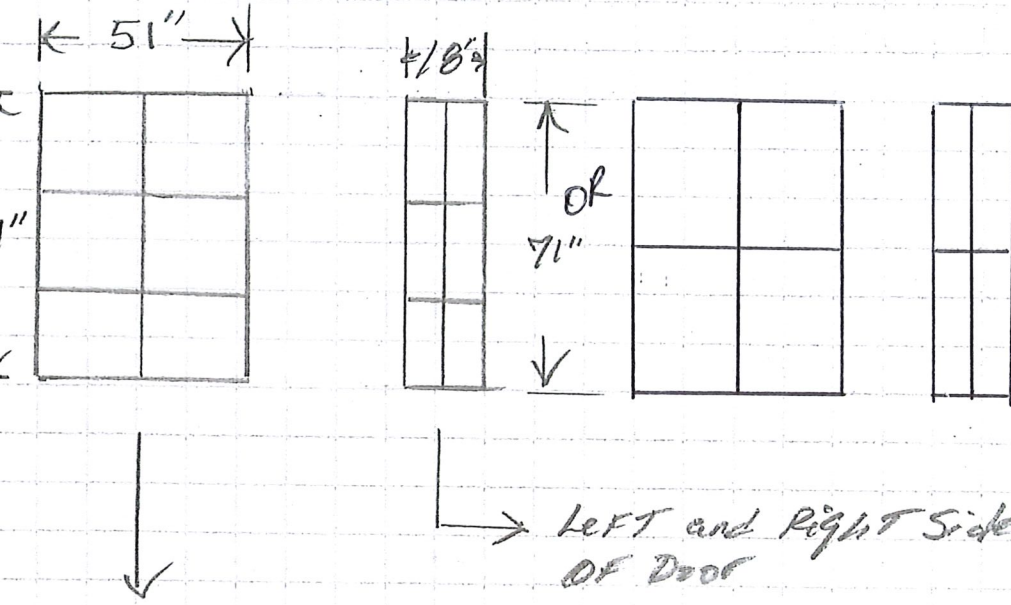
88





2 Willard STREET COURT Cambridge MA

CLASS SIZE AS EXISTING / Change to 6 lite OR 4 lite



LEFT AND RIGHT Side
OF VESTIBULE

MACCO CORP

DORCHESTER DR & WINDOW

41 HALLET ST

617-592-4634

DORCHESTER MA 02124
(617)282-6900

MACCOCORP@GMAIL.COM

Reference:

Quantity	UOM	Item/Description
1.0000	EA	EXT SU EXTERIOR DOOR UNIT FIBERGLASS DOOR, SMOOTH PRO DIRECT GLAZED, SGL, LH, IS, 3-0, 6-8 HGT, SP686DG-LE, SGL BORE, BROSCO RADIUS HINGE, BLACK HINGE, 4-9/16, COMPOSITE PRIMED FRAME, BRONZE COMPRESSION WS, *ALUM COMP BRONZE SILL*, NO CASING, 3-1/2 HORNS

