



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).

Project is the replace current metal halide lighting fixtures with LED lights. Two documents attached.

1) Presentation summarizing lighting project.

2) Detailed lighting plan.

Meeting attendees with be:

Andus Baker, President, Cambridge Skating Club - andus@comcast.net, 617-823-3408

Doris Jurisson, President, Cambridge Tennis Club - dorisjj@gmail.com, 617-852-3927

Glenn Heinmiller, Principal, Lam Partners - Architectural Lighting Design - glenn@lampartners.com, 617-702-5945

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="Cambridge Skating Club"/>		
Mailing Address:	<input type="text" value="40 Willard St, Cambridge MA, 02138"/>		
Telephone/Fax:	<input type="text" value="617-354-2017"/>	E-mail:	<input type="text" value="cambridgeskatingclub@comcast.net"/>
Signature of Property Owner of Record:	<i>Andus D Baker, CSC President</i>		
<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"/>