



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).

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| 1. Proposed single car garage in location of car port.
2. Revised second floor deck railing
3. Proposed burm to replace retaining wall. Height to be determined with assistance from the city of Cambridge Public Works. |
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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="Koby Kempel"/>	
Mailing Address: <input type="text" value="292 Newburty Street, PMB 485, Boston, MA 02115"/>	
Telephone/Fax: <input type="text" value="671-470-3715"/>	E-mail: <input type="text" value="kobykempel@yahoo.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="Dustin Nolin"/>	
Mailing Address: <input type="text" value="1 Huntington Ave., Unit 707, Boston, MA 02116"/>	
Telephone/Fax: <input type="text" value="781-718-8009"/>	E-mail: <input type="text" value="dustin@dna-architecture.com"/>

(for office use only):	
Date Application Received: <u>4/12/22</u>	Case Number: <u>4775</u> Hearing Date: <u>5/5/22</u>
Type of Certificate Issued: _____	Date Issued: _____