



# CAMBRIDGE HISTORICAL COMMISSION

831 Massachusetts Avenue, 2<sup>nd</sup> 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: 11 Stuy St, Cambridge, Massachusetts

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

Remove existing windows + replace with 14 Marvin replacement windows with Energy star rated glass. Color will conform to other existing windows in the building. Upper sash grids to be simulated divided lite grids.

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: Rosemary LLC / Rich Earthall	
Mailing Address: 19 Elm St Cambridge MA 02138	
Telephone/Fax: 617 212 9848	E-mail: Rich@NCPmgmt.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: LANY EVANS / EVANS Home Improvement	
Mailing Address: PO Box 301 Cohasset MA 02025	
Telephone/Fax: 617 590 2867	E-mail: EVA0033@AOL.COM

(for office use only):			
Date Application Received: _____	Case Number: _____	Hearing Date: _____	
Type of Certificate Issued: _____	Date Issued: _____		