

## HISTORIC PRESERVATION COMMISSION

APPLICATION for CERITIFICATE for HISTORIC DISTRICT PROPERTY

FOR OFFICE USE ONLY
Application number: 4PC 11. FC
Received: 8/2/// by:/CC
App. Accepted:
Hearing date: 8/16/11
App. Returned:

DATE: 8-2-11

DATE:

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TYPE OF CERTICATE REQUESTED: APPROPRIATENESS			S: NON-APPLICABILITY:			HARDSHIP:		
PROPERTY LOCATION: 91 BOSTON ST. Somerville							: 	
OWNER: Evene Lund + Gail Perry Borden						TEL (E	:	
OWNER'S ADDRESS: 7/2 SWATTON RD							!	
Contact Salem, Ma 01970							E-MAII	
APPLICANT (IF NOT OWNER):								
APPLICANT'S ADDRESS:								
7 II Elouri o Abbricado							E-MAIL	
IS APPLICANT:	OWNER: CONTRACTOR: ARCHITECT:				ITECT:	OTHER		
		V	•				f	
<b>ZONING:</b> A proposed increase in square footage, height, or enclosed space, including garages, or a change in use or occupancy may require a ZONING VARIANCE. If a ZONING VARIANCE is required, the Historic Preservation Commission will hold hearings in a parallel process to hearings before the Zoning Board of Appeals. Certification is hereby made that a hearing by the Zoning Board of Appeals is scheduled for, or was held on (INSERT DATE HERE):								
Applicant's Signature:								
WORK INCLUDES: check all that apply								
Addition:	New Windows: New Siding: Repair Porch:						Roofing: Vin porch	
Demolition:	Repair w	·	Repair Siding:				Chimney:	
Fence:	Landsca		Sign:				Other:	
Remove Lattice from pach Repair pach as reeded.  OHCD RECEIVED STAMP:								
Applicant must supply scale drawings, photographs of existing conditions, and other supporting information.  APPLICATIONS WITH INSUFFICIENT DOCUMENTATION WILL NOT BE REVIEWED  Photographs: Materials samples: Manufacturer's literature: Drawings: Site or Plot Plan:  Other:								
SIGNATURES:	al P.	nas Randa	nn.					

If Owner is a Condominium or Cooperative Association, an authorized Trustee must sign

OWNER: