

TOWN OF HARWICH
HISTORIC DISTRICT AND
HISTORICAL COMMISSION



Please submit this application to: Town of Harwich Building Department
732 Main Street, Harwich, MA 02645
Telephone: (508) 430-7506 Fax: (508) 430-4703

Application fee: \$55

Harwich General By-Laws, Chapter 131, Article II, §131-8.A, Notice of Intent to Demolish. Before any building constructed prior to one hundred years before the present calendar year is demolished in whole or in part, a Notice of Intent to do so will be filed with the Commission.

Application for Notice of Intent

I, ROBERT/MARSHA WHITEHEAD intend to demolish **in whole or in part** the structure located at
(Print Owner/Applicant's Name) (circle one)

10 HERNDON WAY HARWICH, MA /
(Street Number) (Street Name) (Village), (Assessor's Map) (Parcel #) (Zoning District(s))

Section 1 - Owner/Applicant Information (Note: A non-owner may apply, however written authorization of the owner is required at the time of submittal of this Application)

Legal Owner(s) ROBERTS MARSHA R WHITEHEAD LIVING TRUST Title

Mailing Address 10 HERNDON WAY, HARWICH, MA 02645

Email Address MARSHA.WHITEHEAD23@gmail.com Telephone 317-306-5390

Legal Owner's Authorization Marsha R. Whitehead
(Signature)

Applicant(s) (if different) ERIK TOLLEY, ERT ARCHITECTS, INC.

Mailing Address (if different) 299 WHITE'S PATH S. YARMOUTH, MA 02664

Email Address ERIK@ERTARCHITECTS.COM Telephone 508-362-8883

Section 2 - Determination of Historical Significance

Date Building was Constructed 1840

Which records were used to establish this date? ASSESSOR'S CARD & TOWN'S

INVENTORY LIST

Description of Structure(s) to be demolished (in whole or in part) PARTIAL DEMO OF

EXISTING KITCHEN ADDITION, SHED ADDITION, & MECHANICAL ROOM ADD.

Reason for Demolition POOR CONDITION / ADDITION IN PLACE

Proposed Reuse SINGLE FAMILY

Is the property on the Town's Inventory List: YES

Is the building listed on the National or Massachusetts Register of Historic Places? NO

If yes, which register? _____

Original Owner, if known _____

Subsequent Owners, if known _____

What is known about the history of the property? _____

Further, has the property been associated with any noteworthy events or with the political, cultural, economic, or social history of the Town or Region? Please list: _____

Type of Architectural Style: CAPE

Method of Construction: WOOD FRAMED

Type of Materials Used: _____

Name(s) of Architect, Designer or Builder if known: _____

Section 3 - Project Plan and Condition of Existing Structures

Full Demolition or Partial Demolition

For Partial Demolition, describe portion(s) to be demolished EXISTING KITCHEN, SHED
& MECHANICAL ROOM (SEE PAGE 2)

Age(s) of portion(s) to be demolished 1840 - ASSUMED FOR ENTIRE STRUCTURE

Describe how the remaining structure will be treated and renovated REMAIN AS-IS w/
ADDITION IN PLACE OF PORTION TO BE REMOVED

List reports detailing condition of structure and results of inspections conducted by certified engineer or other design professional SEE ATTACHED FROM COASTAL ENGINEERING

Is there room on the site to relocate the structure or integrate it with the new project? Yes No

Describe what alternatives to demolition have been investigated _____

Section 4 - Filing Requirements

One Certified Abutter List – available from the Assessor’s Office for a fee.

One (1) original and eight (8) copies of each of the following shall be submitted:

1. Completed Application Form with Owner authorization
2. Certified Site Plan and Locus Map
3. Registered Professional(s) Stamped Reports of Inspection
4. Complete set of Photographs (of sufficient quality and number) showing **all:** exterior elevations, significant architectural details, and /or detailing existing conditions supporting claim of conditions
5. List and copies of appropriate references and documents consulted to determine age and historical significance of structure.
6. **For Partial Demolitions:** Plans and Drawings of existing areas to be demolished and final elevations of completed project.

The application shall not be considered complete until the all the above requirements and information are provided and submitted with this application. Attach Authorization to represent/apply.



(Signature of Applicant/Representative)

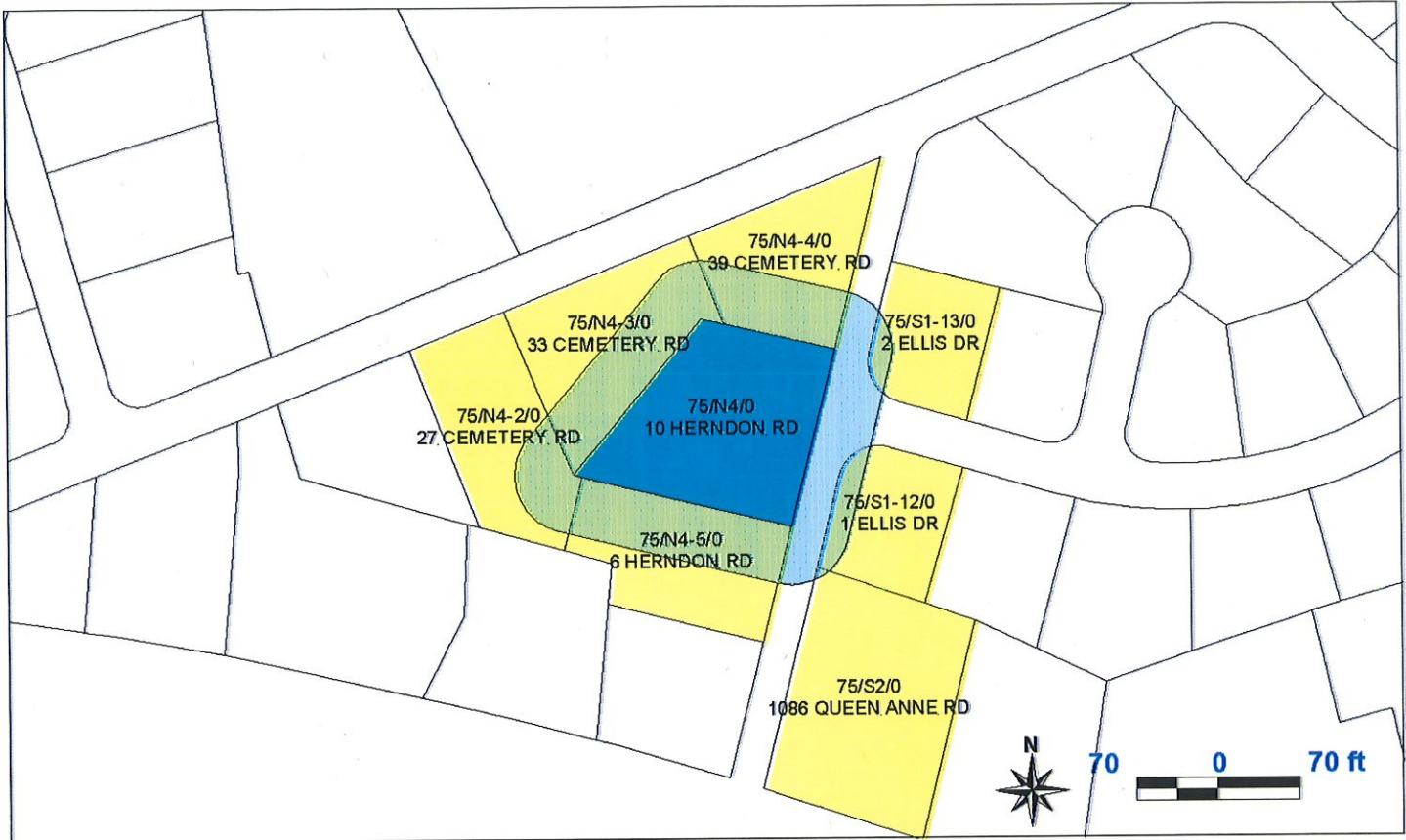
12.15.2022

(Date)



TOWN OF HARWICH, MA
 BOARD OF ASSESSORS
 732 Main Street, Harwich, MA 02645

Abutters List Within 50 feet of Parcel 75/N4/0



Key	Parcel ID	Owner	Location	Mailing Street	Mailing City	ST	ZipCd/Country
6331	75-N4-0-R	WHITEHEAD MARSHA R TRS ET AL WHITEHEAD ROBERT S TRS	10 HERNDON RD	141 POCKET BEND CIR	SUMMERVILLE	SC	29486
6335	75-N4-2-0-R	RISTUCCIA LITA M TR ESTATE OF LITA M RISTUCCIA REVOCABLE TRU	27 CEMETERY RD	27 CEMETERY RD	HARWICH	MA	02645
6336	75-N4-3-0-R	JONES JOHN B ESTATE OF C/O HUDSON KIM	33 CEMETERY RD	1421 ORLEANS RD PMB 137	E HARWICH	MA	02645
6338	75-N4-4-0-R	CANDAGE PAUL W	39 CEMETERY RD	PO BOX 9151	ORLEANS	MA	02653
6340	75-N4-5-0-R	LEWIS FREDERICK J JR & LEWIS ALISON B	6 HERNDON RD	11 ROLLING GREEN DR	GANSEVOORT	NY	12831-2081
6362	75-S1-12-0-R	HARRIS CAROL A	1 ELLIS DR	1 ELLIS DR	HARWICH	MA	02645
6364	75-S1-13-0-R	HOWLETT CHRISTOPHER J & HOWLETT LAURA A	2 ELLIS DR	2 ELLIS DR	E HARWICH	MA	02645
9699	75-S2-0-R	CERRETANI CATHE A TR CATHE A CERRETANI REV TRUST	1086 QUEEN ANNE RD	1086 QUEEN ANNE RD	HARWICH	MA	02645





