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**HISTORIC DISTRICT COMMISSION**

William Moonan  
*Chairman*

Town Hall  
10 Mudge Way  
Bedford, MA 01730-2144  
Phone 781-275-7446  
Fax 781-275-133

**APPLICATION FOR CERTIFICATE OF APPROPRIATENESS  
OR PERMIT FOR DEMOLITION OR REMOVAL**

This application is necessary before making any changes to properties within the Bedford Historic District. These changes include: painting, building additions or modifications, demolition, landscaping, lighting, paving, and interior/exterior signs. An application is not needed for routine maintenance that preserves appearances, nor for white paint, nor when the change is not visible from a public way. Submit your application to the Code Enforcement Department for a date stamp. The Commission meets on the first Thursday of each month; please submit your application three (3) weeks in advance to allow the HDC to satisfy legal notice requirements. The names and phone numbers of board members are included in this packet. You are welcome to contact them for help or additional information. Certain changes (signs, building and demolition) require a building permit; for those changes, obtain "pre-approval" by the Building Inspector on this application.

Property address: \_\_\_\_\_

Business name: \_\_\_\_\_

Applicant, Owner and / or Tenant: \_\_\_\_\_

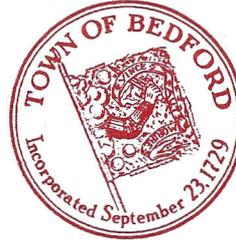
Mailing address: \_\_\_\_\_

Contact telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Please include the following: (missing items may delay the hearing or decision)  
eight (8) sets of each:

- Site Plan showing existing site as well as locations of changes.
- Scale specifications of proposed change / additions.
- Samples of building materials, color schemes, manufacturers' brochures.
- Color photos of existing conditions.
- \$15 filing fee, payable to "Town of Bedford."
- Legal Advertisement Authorization Form
- Certified list of abutters from Assessors' Office—please give the Assessors' office a lead-time of 7 days for preparation.

TOWN OF BEDFORD  
BEDFORD, MASSACHUSETTS 01730



TTD/TTY: 781-687-6124

Description of requested changes: (use additional sheets if necessary):

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Owner's signature, required: \_\_\_\_\_ date \_\_\_\_\_

Print owner's name: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_ date \_\_\_\_\_

Print applicant's name: \_\_\_\_\_

Building Inspector's pre-approval \_\_\_\_\_ date \_\_\_\_\_

Christopher Laskey

**Please note:** Upon approval by the HDC, a permit will need to be obtained from the Building Department before the project is started.

Received by HDC: \_\_\_\_\_ date \_\_\_\_\_

**LEGAL NOTICE AUTHORIZATION FORM**

**GATEHOUSE MEDIA NEW ENGLAND**  
**Community Newspaper Company**  
**254 Second Avenue, Needham, MA 02494-2811**

Date: \_\_\_\_\_

I hereby acknowledge that the application I am submitting to the:

**TOWN OF BEDFORD, MASSACHUSETTS—HISTORIC DISTRICT COMMISSION**

***\*\*\*The section below is to be filled out by the BEDFORD HDC STAFF:***

The application requires a legal notice of public hearing. Said hearing is to be held on \_\_\_\_\_ . Legal Notices are currently submitted to the BEDFORD MINUTEMAN for publication on the following date(s) \_\_\_\_\_ .

***\*\*\*The section below is to be filled out by the APPLICANT:***

I hereby AUTHORIZE that the required legal notice be billed directly to me by, GateHouse Media New England, d/b/a/, Community Newspaper Company, Inc.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

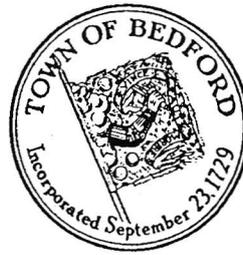
City: \_\_\_\_\_, State: \_\_\_\_\_, Zipcode: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Original copy to Town, copy to Applicant, copy to the Bedford Minuteman Legal Ad Publication Department with a copy of the Legal Ad.

# BOARD OF ASSESSORS

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TOWN HALL  
10 MUDGE WAY  
BEDFORD, MA 01730  
TEL. 781-275-0046  
FAX 781-275-0809

## Abutters List Request

For Submission to the \_\_\_\_\_ for \_\_\_\_\_  
(Board/Committee/Commision) (Special Permit/Sign/License ect.)

Date \_\_\_\_\_

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone No. \_\_\_\_\_

Property Location \_\_\_\_\_

Property Owner \_\_\_\_\_

Parcel I D: Map \_\_\_\_\_ Parcel \_\_\_\_\_

Special Instructions:

Pursuant to Massachusetts General Law, I hereby certify that the names and addresses of the attached list of parcels are as they appear on the most recent applicable tax list.

Certified by: \_\_\_\_\_

For the Board of Assessors

Fee : \$15

Paid \_\_\_\_\_

Date