

Col 7 308 7365

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DATE 7/22/13

To the honorable, the City Council of the City of Cambridge
The undersigned respectfully pray

WALDEN SPA & MARKET, located at 272 WALDEN ST
Name of Petitioner or Business Address

2013 JUL 22 PM 9 24
OFFICE OF THE CITY CLERK
CAMBRIDGE, MASSACHUSETTS

Be granted permission for a/an () "A" FRAMED SIGN, () SANDWICH BOARD
() DISPLAY OF MERCHANDISE () Temporary Banners Hung Across Public Way
() # of TABLES, for restaurant seating () Y () N, () # of CHAIRS REQUIRED () Y () N

Permit Fee: \$75.00 per year renewable on or before March 31

In front of premises numbered 272 Walden Street, Camb MA, on
Address where sign or seating will be

Check the Days off the week

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Time period: FROM 8 A.M. TO 8 P.M.

Petitioner signature [Signature]

Print name here Brayshell Louis-Jacques on behalf of Walden Spa.

Telephone number Col 7 308 7365

Emergency # Col 7 515 3445

Email Address walden.spa.cambridge@gmail.com

PLEASE ATTACH A SKETCH TO YOUR APPLICATION ILLUSTRATING YOUR REQUEST

Petitioner must also provide and have on record a Certificate of Insurance Coverage (naming the City of Cambridge) as the holder. Coverage amount should be in the sum of 1,000,000.00