



**TOWN OF WEBSTER**  
350 Main Street, Webster, MA 01570  
(508) 949-3800 x4010  
www.webster-ma.gov  
planning@webster-ma.gov

**HISTORICAL COMMISSION**

## **Demolition Delay - Determination Request**

Please fill out all fields and return to the Building Commissioner at [building.department@webster-ma.gov](mailto:building.department@webster-ma.gov)

**\*\* Please Note: All Fields Must Be Completed. \*\***

Date: \_\_\_\_\_ Building Permit# \_\_\_\_\_

Address of Structure to be Demolished: \_\_\_\_\_

Assessor Map & Parcel Number: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Email: \_\_\_\_\_

Owner Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Required Documentation – Please attach:**

- ☐ Massachusetts Cultural Resource Inventory Sheet (MACRIS) <https://mhc-macris.net>  
Check here if Structure is Not Listed in MACRIS \_\_\_\_\_
- ☐ Current Assessor's Property Field Card (contact Assessor Office)
- ☐ Photographs showing all exterior sides of the property
- ☐ Photographs showing the property in context of the surrounding neighborhood
- ☐ Building Commissioner Site Visit Report

**Property Description:** Describe the property proposed for demolition. Attach additional pages as necessary. A written explanation is required for any information that cannot be provided .

Year(s) Built: \_\_\_\_\_ Area (square footage) \_\_\_\_\_

Current Use of Structure to be Demolished \_\_\_\_\_

**The property is (check all that apply):**

- ☐ A principal structure which is in whole or in part more than 50 years old.
- ☐ An accessory structure 50 or more years old.
- ☐ Listed on the National Register of Historic Places

**Demolition Type:**

- ☐ Full Building Demolition?
- ☐ Partial Building Demolition?

**Reason for Demolition:** \_\_\_\_\_

**Property Type:**

Residential:    ☐ Single Family        ☐ Two Family        ☐ Multi-Family

Outbuilding: Specify: \_\_\_\_\_

Commercial: Specify: \_\_\_\_\_

Industrial: Specify: \_\_\_\_\_

Other: Specify: \_\_\_\_\_

**Brief Description of reuse, reconstruction or replacement:** \_\_\_\_\_

**Historical Narrative and additional information describing the property:**

☐ Historic Name of Building: \_\_\_\_\_

☐ Style / Form (i.e. Colonial, Federal, Greek Revival, etc.): \_\_\_\_\_

☐ Method of Construction: \_\_\_\_\_

☐ Work of a Master: \_\_\_\_\_

☐ High Artistic Value: \_\_\_\_\_

☐ Engineering or Technological Advances: \_\_\_\_\_

☐ Setting / Neighborhood: \_\_\_\_\_

☐ Identify significant Webster, State, or US historical, political, economic, cultural or social event, series of events or historical trends (i.e. development of the mill industry, associated with the building or structure and the related dates: \_\_\_\_\_

☐ Identify any person or persons significant to the political, economic, social, or cultural life of Webster, the State or United States that is associated with the building or structure and noted the dates of association: \_\_\_\_\_

Applicant Signature \_\_\_\_\_

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

Owner Signature \_\_\_\_\_

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

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**FOR HISTORICAL COMMISSION USE**

Date of Historical Commission Determination \_\_\_\_\_

Property **is NOT** Historically Significant: \_\_\_\_\_ Property **is** Historically Significant: \_\_\_\_\_

Public Hearing Required: \_\_\_\_\_ Notes: \_\_\_\_\_

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WHC Authorized Signature