



**Town of Truro
Agenda
Truro Historical Commission Remote Public Hearing
Thursday, July 7, 2022, at 5:00PM**

Board/Committee/Commission:

Truro Historical Commission

Public Hearing on Thursday, July 7, 2022, at 5:00PM

To review the proposed demolition and removal of a Modernist style studio structure designed by Charlie Zehnder. The proposed demolition is in conjunction with the construction of a new residence located at 113 Castle Road, Truro, MA, Map 46, Parcel 398. This proposal is subject to review under the General Bylaws, Chapter VI Preserving Historic Properties.

All interested parties are urged to attend the meeting via the GoToMeeting Information below.

Please join the meeting from your computer, tablet or smartphone via <https://meet.goto.com/928434957> You can also dial in using your phone: 1-877-309-2073 Access Code: 928-434-957

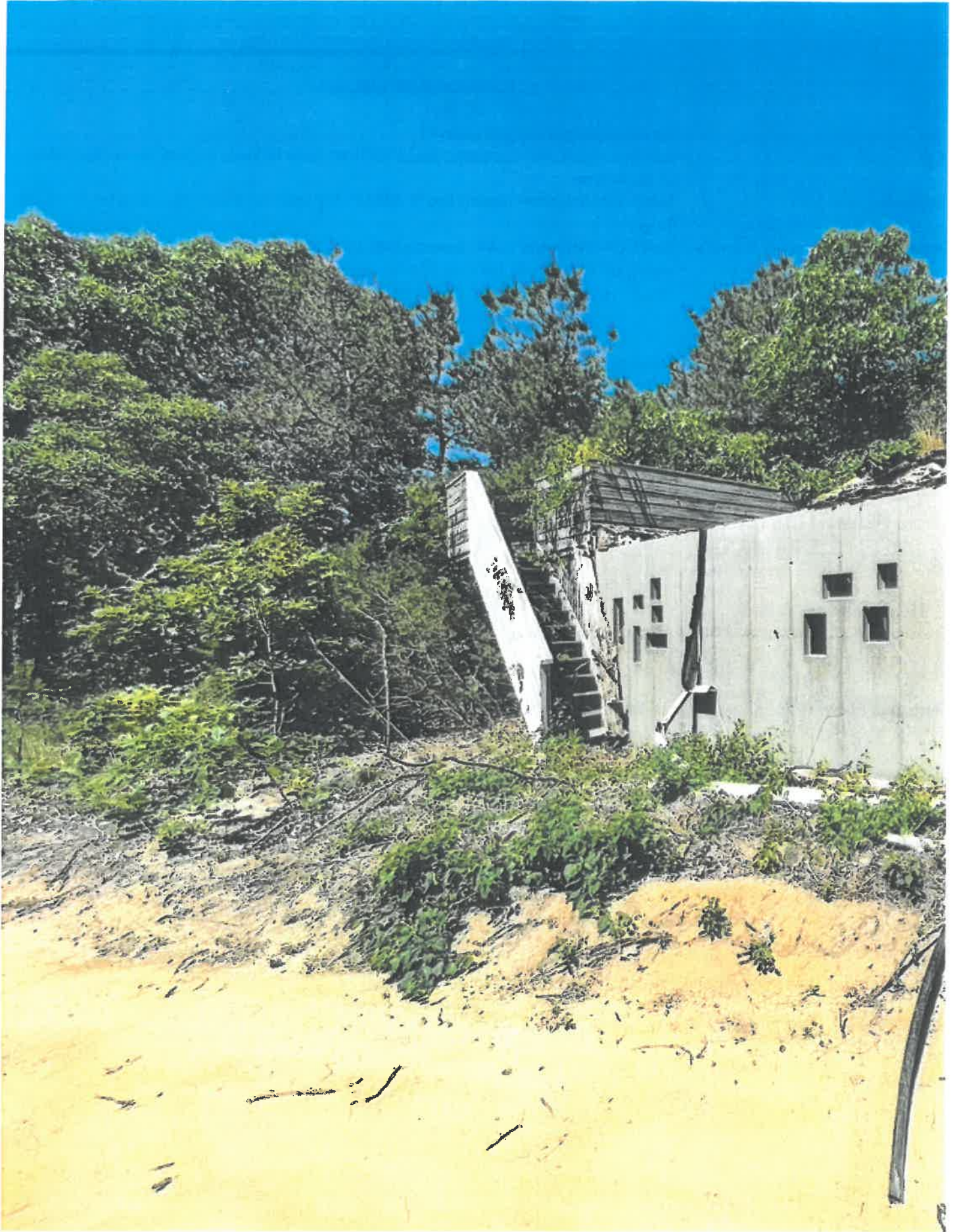
**Matthew Kiefer, Chair
Truro Historical Commissions**

TOWN OF TRURO
11:15AM

JUN 08 2022

**RECEIVED
TOWN CLERK**
NS

Reposted 7/6/2022



Site Visit Photo of Rothschild House from 113 Entry Drive:



**Site Plan Requested at Site Visit Showing Relationship of Proposed New House to Proposed Demolition Structure
(Further Subdivision of Rothschild property at 105 Castle Road into 4 lots also shown.)**

Construction Plans:

Chalie Zehnder 1979 Plans for Studio and Building Permit

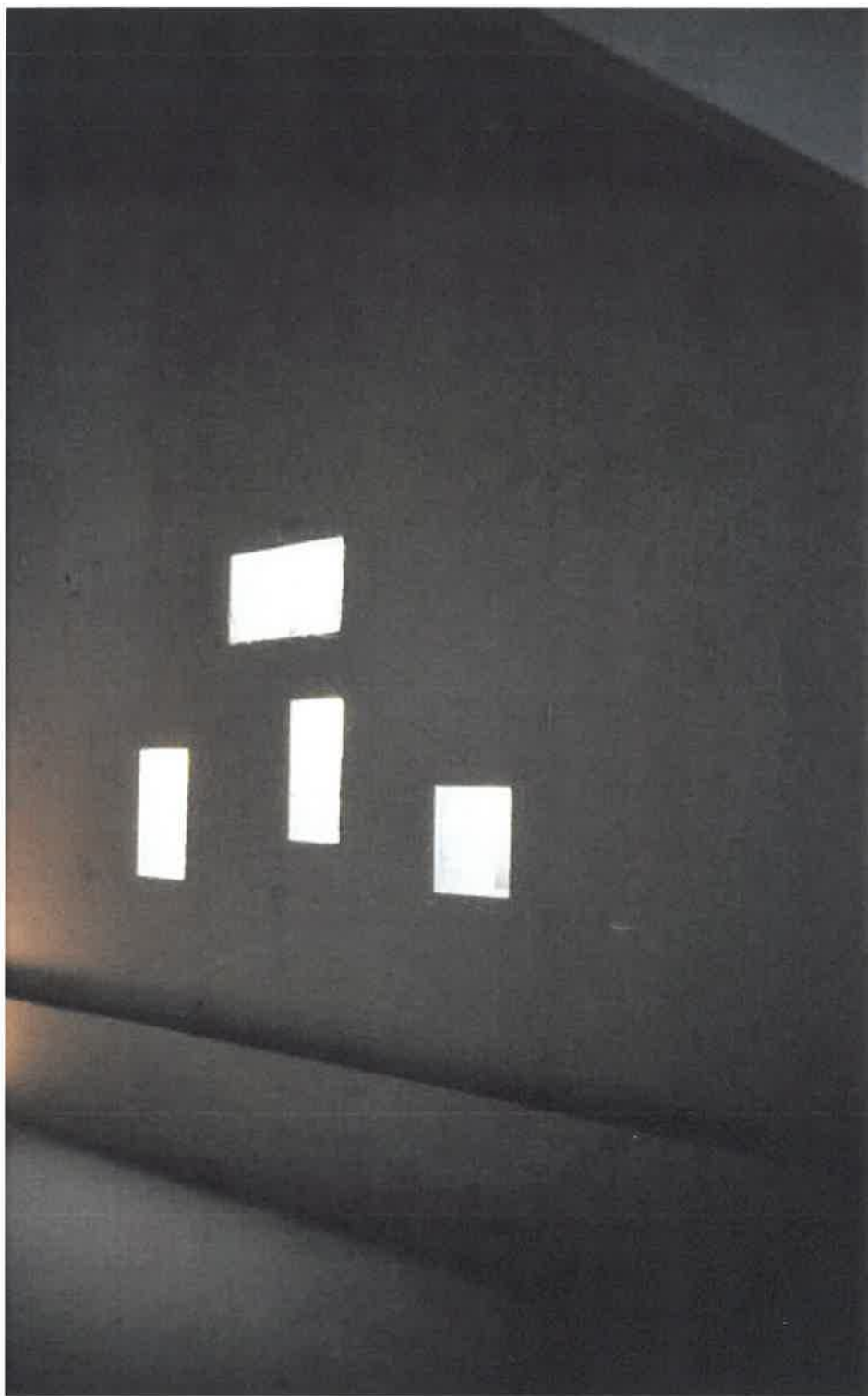
Early Photographs of Studio:





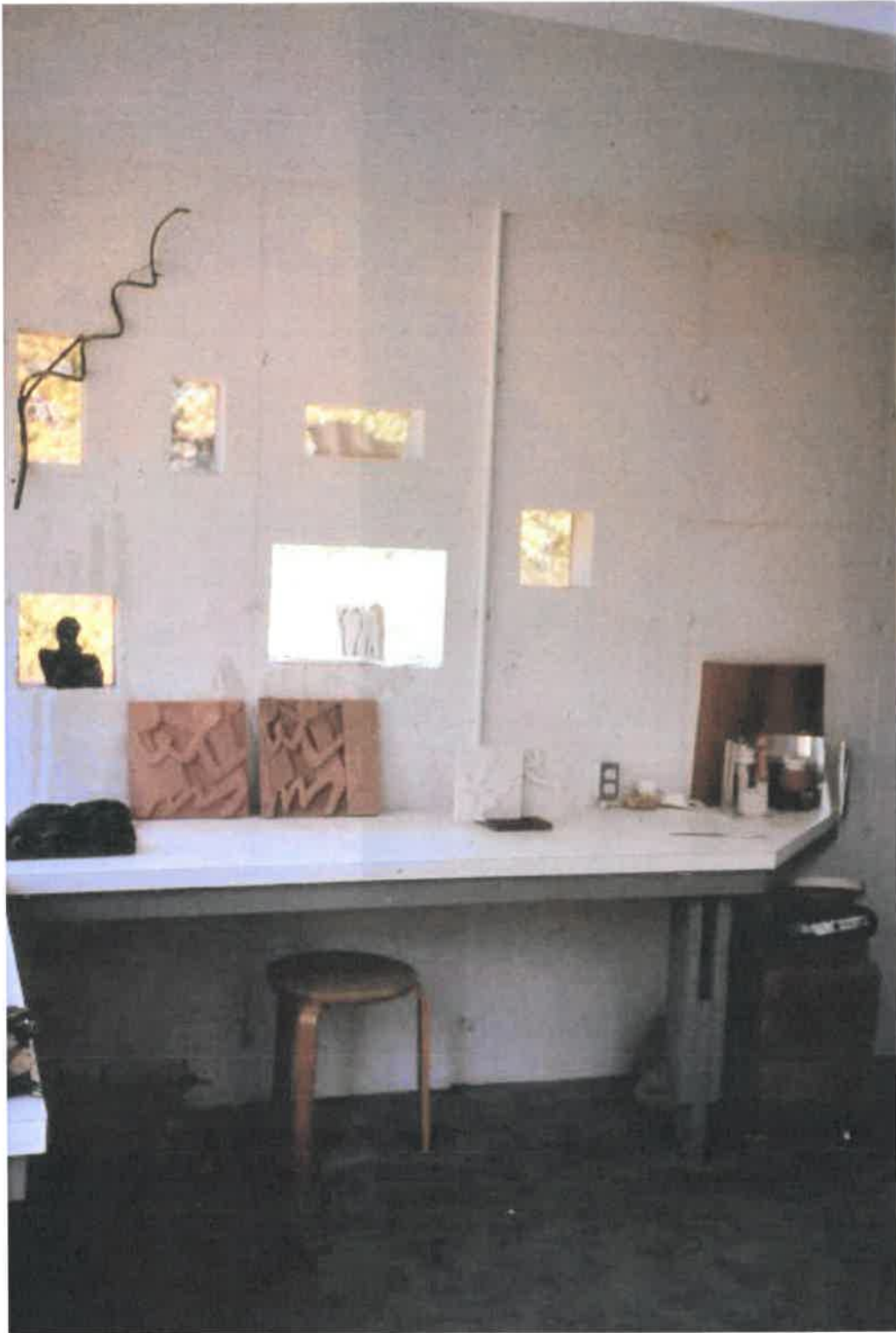














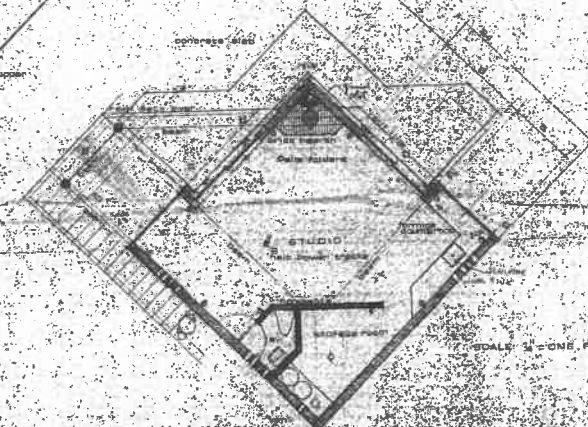
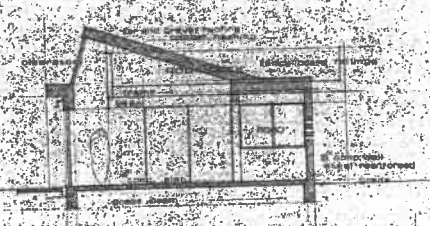
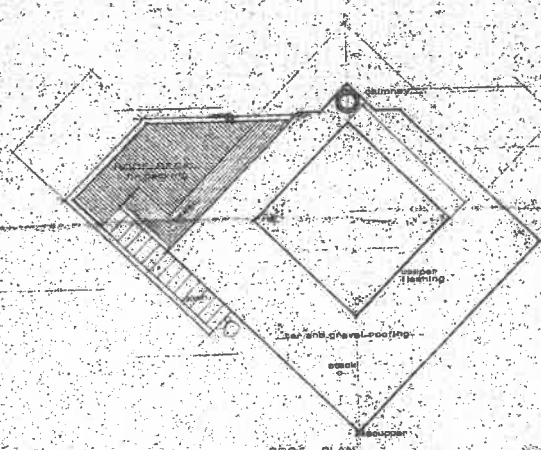






MHC Form B TRU.312 for 105 Castle Road Identifying the Rothschild house (former/relocated Pamet Life Saving Station) and Zehnder Studio.

Demolition Request:



DESIGNER	CHARLES L. BEND
CLIENT	ROTHSCHILD BUILDING CORP.
PROJECT	ROTHSCHILD BUILDING TRUSS
DATE	1955
SCALE	1" = 10' 0"

Sheet 43 + 46
Parcel (46-1)

79-99

COMMONWEALTH OF MASSACHUSETTS
TOWN OF TRURO
APPLICATION FOR BUILDING PERMIT

Date Oct. 15, 1979 Board of Health Permit No. 79-54 Paid 35.00
V. Henry Rothschild @nd, 30 Rockefeller Plaza, New York, N.Y. 10020
OWNER'S NAME
Castle Road, Truro
Helen C Conger
NON RESIDENT ADDRESS
LOCATION OF PROPERTY
Robert M. Rose, Builder, Box 845, Cove View Rd., Wellfleet, Ma. 02667
ADJACENT TO:
BUILDER'S NAME AND ADDRESS
Explain in detail work being done. Build Studio

Is there any change of use _____

Estimated Cost \$ 37,690.00 Type Chimney 1 flue brick Firestops _____

If this is a public building with over 35,000 cubic feet a Registered Architect's plan must accompany this application.

Number of stories (exclusive of attic, basement, cellar) One Is there an attic No

basement No cellar No Height from mean ground level to: Coping of flat roof

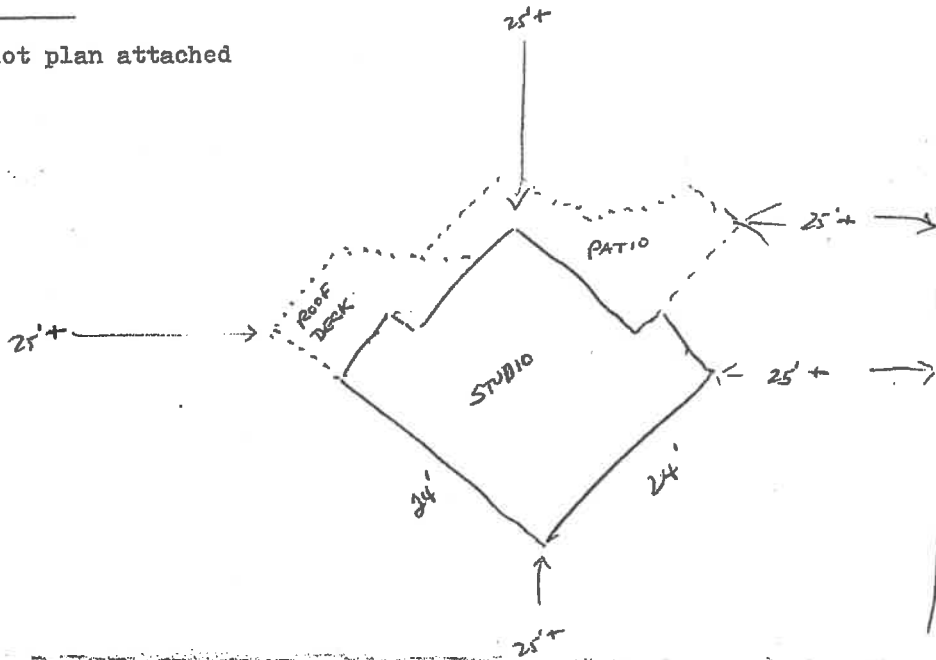
_____ decline of mansard roof _____ Mean height level between eaves and ridge of

gable, hip, or gambrel roof (max all 23 feet.) Height from mean ground level to highest point gable, hip,

or gambrel roof 'max 30 16 ft.

Draw a diagram showing—1. Shape and dimensions of lot and area (in square feet). 2. Streets.
3. Existing buildings—if any and any new building or addition. 4. Distance of new or existing building
to all lines of lot.

Plot plan attached



I certify that the above statements are correct and that all work done will comply with all By-Laws, Board of Health Regulations, and Fire Engineers Regulations of the Town of Truro. The Applicant agrees to give the Building Inspector notice before enclosing the studding on this building.

This permit is issued by the Town of Truro in accordance with the Truro By-Laws. However if property is within the boundaries of the Cape Cod National Seashore Park, the applicant is advised to clear this permit with the National Park Service, Eastham, Massachusetts before starting construction.

Robert M. Rose Signature of Applicant or Agent

Louis Ciampa Signature Planning Board

Louis Ciampa Signature Building Inspector

10-15-79

DATE

Accepted ✓ Refused _____ Reason _____

V. Henry Rothschild 2nd = 30 Rockefeller Plaza N.Y. N.Y 10020
Studio } on Sheet 43+46 Castle Rd.
House } Parcel (46-1)

Steele
24x24 = 576 ' = 25.00

Deck 125' = 10.00

Sewage System 2 units
12.00

47.00

Stove Permit
6.00

\$ 53.00

INSTRUCTIONS

Building Inspector

From 1923, however, the

Building Permit Application

Massachusetts State Building Code, 780 CMR, 9th Edition



TOWN OF TRURO
Building Department

24 Town Hall Rd.
PO Box 2030
Truro, MA 02666
Tel (508) 349-7004 x131 Fax (508) 349-5508

Permit #:

Fee:

SITE INFORMATION

Project Site: 113 Castle Rd

Assessors Map & Parcel: 46-398

Zoning District: Res.

☒ Outside Flood Zone

☐ Inside Flood Zone - Specify:

Setbacks: Front:

Left Side:

Right Side:

Rear:

Lot Area (sq. ft.)

Frontage:

Water Supply: ☒ Private

☐ Public

Subject to Policy 28: Curb Cut? ☐ Y ☐ N

If Yes, please attach a copy of the approval to this application.

SUBJECT TO NHESP/MESA REVIEW? ☐ Y ☐ N

* IF YES, PLEASE ATTACH A COPY OF THE APPROVAL.

PROPERTY OWNERSHIP

Owner of Record: Paul & Amy Holt

Mailing Address: 75 Andrew St. Newton, MA 02461

Phone: 617-719-5500

E-mail: amyholt4842@gmail.com

Property Owner Authorization

Signature: Amy Holt

Date: 4/13/22

PROJECT INFORMATION

☐ 1 & 2 Family Home

☐ Commercial / Other than
1 & 2 Family Home*

☐ Change of
Use

☒ DEMO - Subject to Chapter VI:
Historic Properties Bylaw? ☐ Y ☐ N

* BUILDINGS IN EXCESS OF 35,000 CU. FT. MUST MEET CONTROL CONSTRUCTION REGULATIONS (780 CMR 116).
ADDENDUM TO PERMIT APPLICATION AVAILABLE IN BUILDING DEPARTMENT.

☐ New Dwelling: # of units _____

☐ Commercial Building

☐ Addition

☐ Alteration

☐ Mechanical

☐ Accessory Structure: (type) _____

Other: _____

Detailed Description of Proposed Work: Demo 15'x15' bunker +
over-grown tennis courts.

Estimated Construction Cost: \$10,000

Debris Disposal:
(Landfill or Company Name) Cape Cod Disposal

Floor Area: (Proposed Work Only) Basement: ☐ unfinished ☐ finished

1st flr: 2nd flr: Porch/Deck: Other:

#fireplaces: #chimneys: #bathrooms: existing proposed

#bedrooms: existing proposed

Type of Heating System:

Type of Cooling System:

CONTRACTOR INFORMATION*

*HOMEOWNER'S AFFIDAVIT REQUIRED IF OWNERS ARE DOING THEIR OWN WORK (RESIDENTIAL PROJECTS ONLY)

Contractor Name: Pine Knoll

Address: PO Box 1347 N. Eastham MA 02651

Phone: 508-255-8292

Email: pineknoll123@gmail.com

CSL#: CS-045183

HIC # 133322

OFFICE USE

HEALTH/CONSERVATION AGENT Review

Signature:

Date:

Other Comments:

BUILDING COMMISSIONER Review & Approval:

Signature:

Issuance Date:



TOWN OF TRURO BUILDING DEPARTMENT

P.O. Box 2030, Truro MA 02666

Tel: 508-349-7004, Ext. 31 Fax: 508-349-5508

BUILDING DEPARTMENT
TOWN OF TRURO

APR 07 2022
RECEIVED BY:

DEMOLITION CHECKLIST

Owner: Paul & Amy Holt

Location: 113 Castle Rd

Map: 46 Parcel: 398

In accordance with the Town of Truro General By-Laws, "Preserving Historic Properties":

- ☐ 1.) Listed on the National or State Register of Historic places, or the subject of a pending application for such a listing; or
- ☐ 2.) Constructed in whole or in part 75 years or more prior to the date of application for a demolition permit; or
- ☐ 3.) Determined by the Historical Review Board to be a significant building either because:
 - ☐ (a.) It is historically or architecturally significant in terms of period, style, method of building construction, or association with a famous architect; or
 - ☐ (b.) It is importantly associated with one or more historic persons or events, or with the broad architectural, cultural, political, economic or social history of the Town or the Commonwealth.

In accordance with 780 CMR Mass State Building Code, Section 112

SERVICE DISCONNECTS FROM UTILITY PROVIDERS:

- ☒ Electric
- ☐ Water
- ☐ Gas
- ☐ Other Connections

(rev. 3/16/11)



247 Station Drive
Westwood, Massachusetts 02090

5/12/22

TO: PINEKNOLL123@GMAIL.COM

Property located at:
113 CASTLE ROAD TRURO MA

To whom it may concern,

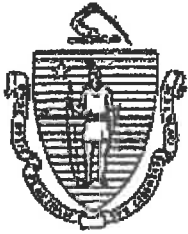
At Eversource, we're committed to delivering great service.

This letter serves as confirmation that the electric service at the address noted above has been removed.

Based on this information, there is no electric power at this address and you may proceed with the demolition. If you have any questions, please contact me at (888) 633-3797.

Sincerely,

Phyllis MacPherson
Electric Services Support Center



The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, MA 02111
www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers

Applicant Information

Please Print Legibly

Name (Business/Organization/Individual):

Pine Knoll

Address:

PO Box 1347 N. Eastham MA 02651

City/State/Zip:

Phone #:

508-255-8292

Are you an employer? Check the appropriate box:

1. ☐ I am an employer with _____ employees (full and/or part-time).*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
3. ☐ I am a homeowner doing all work myself. [No workers' comp. insurance required.] †

4. ☒ I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance. ‡
5. ☐ We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]

Type of project (required):

6. ☐ New construction
7. ☐ Remodeling
8. ☒ Demolition
9. ☐ Building addition
10. ☐ Electrical repairs or additions
11. ☐ Plumbing repairs or additions
12. ☐ Roof repairs
13. ☐ Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

† Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such.

‡ Contractors that check this box must attached an additional sheet showing the name of the sub-contractors and state whether or not those entities have employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.

Insurance Company Name:

Liberty Mutual Ins

Policy # or Self-ins. Lic. #:

WC 5315387098011

Expiration Date:

9/18/22

Job Site Address:

113 Castle Rd

City/State/Zip:

Town MA 02666

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature:

[Signature]

Date:

6/18/22

Phone #:

508-255-8292

Official use only. Do not write in this area, to be completed by city or town official.

City or Town:

Permit/License # _____

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector
6. Other _____

Contact Person:

Phone #: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/16/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

ROGERSGRAY INC

434 ROUTE 134

SOUTH DENNIS

MA 02660

INSURED

PINE KNOLL DEVELOPERS INC

PO BOX 1347

NORTH EASTHAM

MA 02651

CONTACT

NAME: Harrison Martin

PHONE (A/C, No, Ext): (978) 298-1513

FAX (A/C, No):

E-MAIL: hmartin@rogersgray.com

INSURER(S) AFFORDING COVERAGE

NAIC

INSURER A: LM INS CORP

33600

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

COVERAGES

CERTIFICATE NUMBER: 695778

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSD / W/O	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY					EACH OCCURRENCE \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
			N/A			MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG \$
	OTHER:					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS	N/A			BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE	N/A			AGGREGATE \$
	DED	RETENTION \$				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> N/A	N/A			E.L. EACH ACCIDENT \$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below		WC531S387098011	09/18/2021	09/18/2022	E.L. DISEASE - EA EMPLOYEE \$ 100,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000
			N/A			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Workers' Compensation benefits will be paid to Massachusetts employees only. Pursuant to Endorsement WC 20 03 06 B, no authorization is given to pay claims for benefits to employees in states other than Massachusetts if the Insured hires, or has hired those employees outside of Massachusetts.

This certificate of insurance shows the policy in force on the date that this certificate was issued (unless the expiration date on the above policy precedes the issue date of this certificate of insurance). The status of this coverage can be monitored daily by accessing the Proof of Coverage - Coverage Verification Search tool at www.mass.gov/lwd/workers-compensation/investigations/.

CERTIFICATE HOLDER

Pine Knoll
P O Box 1347

North Eastham

MA 02651

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Daniel M. Crowley
Daniel M. Crowley, CPCU, Vice President - Residual Market - WCRIBMA

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/1/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Kaplan'sky Insurance
154 Shore Rd PO Box 267
North Truro MA 02852

CONTACT
NAME:
PHONE
(A/C No. Ext): 508-487-8060 FAX (A/C No.): 508-487-2040
E-MAIL
ADDRESS: commercial@kaplansky.com

INSURED
Pine Knoll Developers Inc.
DBA Pine Knoll Inc.
P.O. Box 1347
No. Eastham MA 02651

PINEKNO-01

INSURER(S) AFFORDING COVERAGE	NAIC#
INSURER A: Evanston Insurance	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 598919154

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INBR LTR	TYPE OF INSURANCE	ADDL SUBR INSD / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER: AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		3AA493540	9/8/2021	9/8/2022	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPIOP AGG \$2,000,000 \$ COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Contractual liability per policy form CG0001 0413 and CG2426 0413.
\$5,000 Bodily Injury and/or Property Damage Deductible per claim.

Certificate holder is included as additional insured on a primary and noncontributory basis with a waiver of subrogation as pertains to general liability if required by written agreement with the insured per policy form MEGL0009-01 0918, CG2001 0413 and MEGL0241-01 0516.

CERTIFICATE HOLDER

CANCELLATION

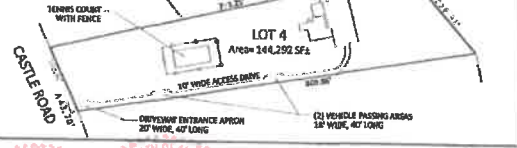
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



KEY MAP

SCALE: 1" = 200'



ZONING TABLE

RESIDENTIAL DISTRICT	
FRONT YARD (STREET) SETBACK	25 FEET
SIDE AND REAR YARD SETBACKS	25 FEET
BUILDING HEIGHT	30 FEET

PROPOSED BUILDING HEIGHT CALCULATIONS	
MEAN GROUND LEVEL = (115.0+113.8+112.0+113.0)/4	
MEAN GROUND LEVEL = 113.4	
MAXIMUM ALLOWABLE BUILDING ELEVATION: 113.4 + 30 = 143.4	
PROPOSED BUILDING ELEVATION: 114.5 (TYP) + 28.0' (BUILDING HEIGHT) = 142.5 < 143.4, OK	

EXISTING STRUCTURE AND TENNIS COURTS TO BE DEMOED

- ### LEGEND
- EXISTING CONTOUR
 - PROPOSED CONTOUR
 - EXISTING SPOT GRADE
 - PROPOSED SPOT GRADE
 - WATER SERVICE LINE
 - UNDERGROUND UTILITY SERVICE
 - TEST HOLE / BORING LOCATION
 - SEPTIC TANK
 - DISTRIBUTION BOX
 - SOIL ABSORPTION SYSTEM
 - RESERVED FOR FUTURE
 - UTILITY POLE
 - BULKHEAD
 - STEP
 - WELL
 - CONCRETE BOUND, FOUND
 - CHAIN LINK FENCE
 - EDGE OF CLEARING

Amy Holt
c/o Pine Knoll Builders, P.O. Box 1347, N. Eastham, MA 02651

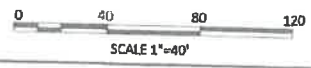
SITE & SEPTIC PLAN
Lot 4, 105 Castle Road, Truro, MA

J.M. O'REILLY & ASSOCIATES, INC.
Professional Engineering & Land Surveying Services

1000 Main Street - Suite 8A
P.O. Box 5770
Brewster, MA 02601 (800)368-6838 Fax

DATE: 01/25/2022	BY: As Mutual	CHECK: RFR	DATE: JMD	DATE: JMD-0171
------------------	---------------	------------	-----------	----------------

SHEET 1 OF 2



C:\MyWork\New Road\Buildings\0225-Lot 4 105 Castle Rd\0225-0225-S05 PLAN.dwg



Commonwealth of Massachusetts
Division of Professional Licensure
Board of Building Regulations and Standards
Construction Supervisor

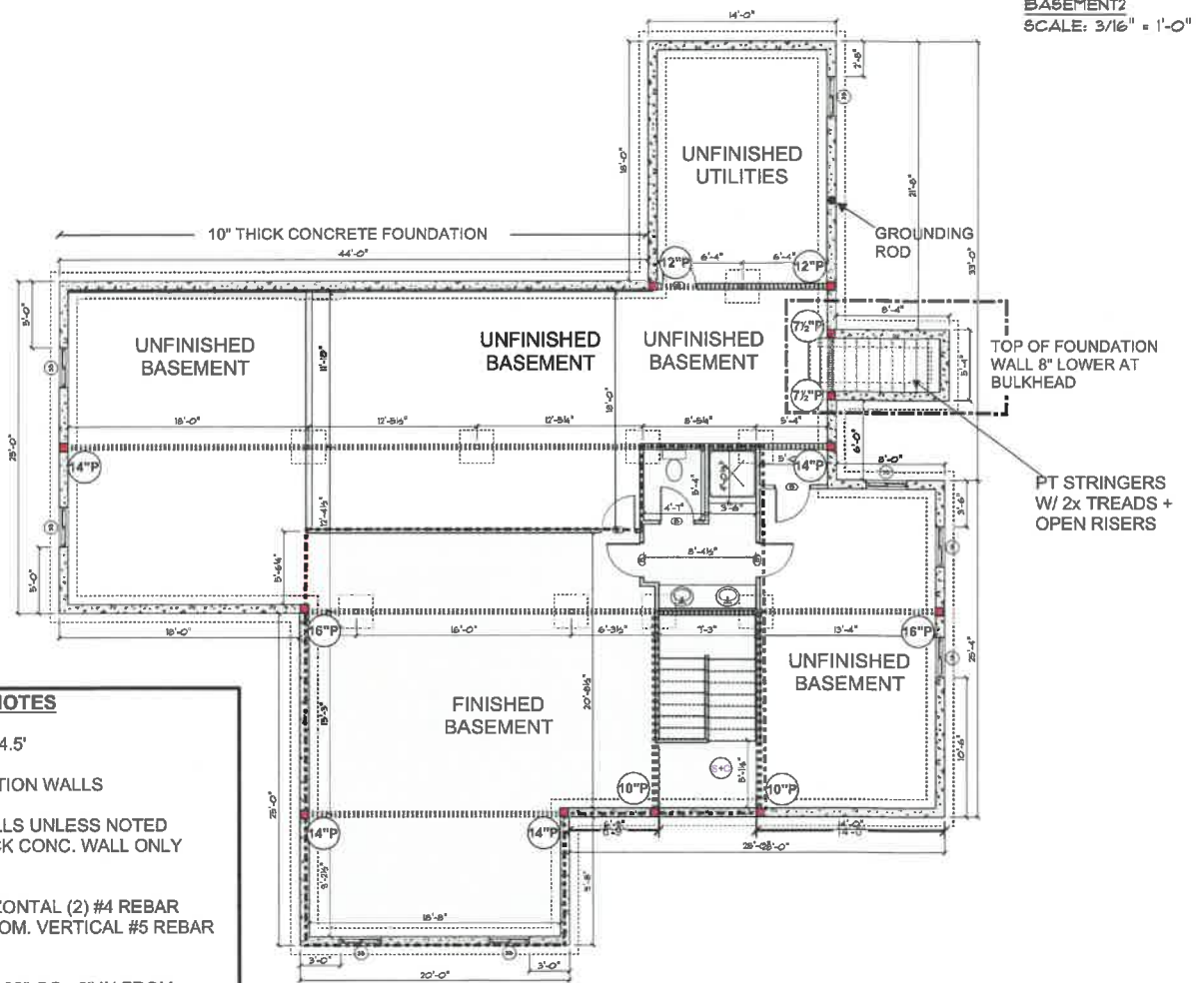
CS-045183

Expires: 09/12/2022

JOHN P FERRO
60 WHIDAH WAY
WELLFLEET MA 02867



Commissioner *Joseph R. Ferreira*

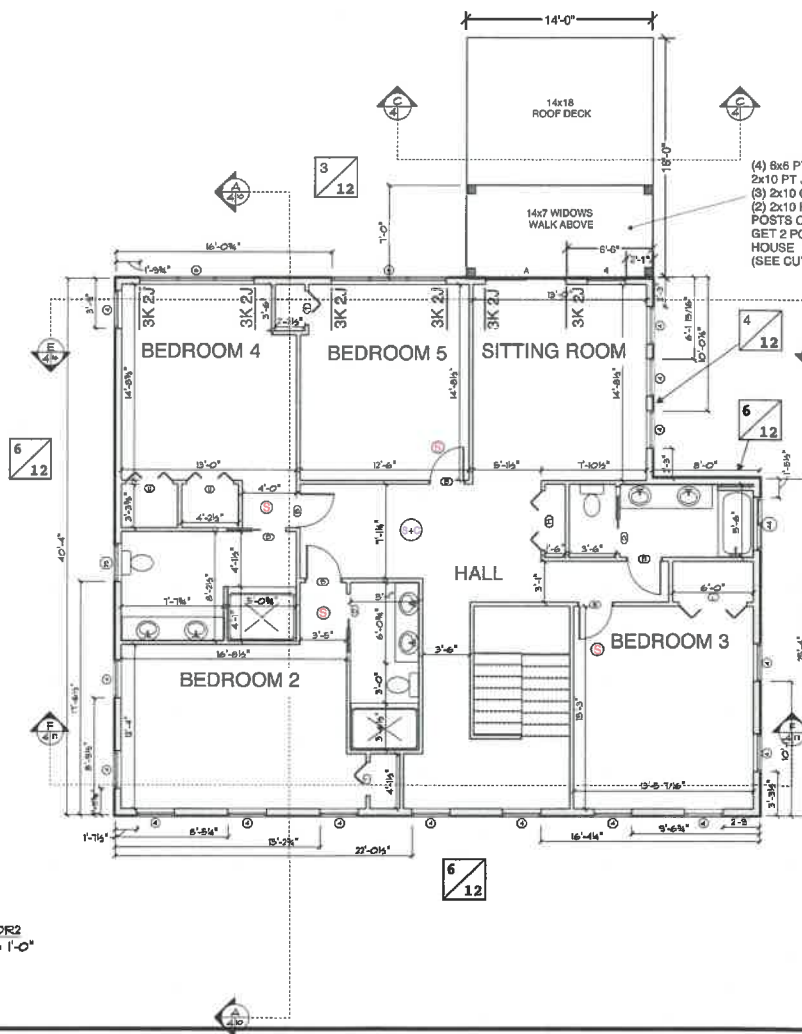


NOTES

- TOP OF WALL EL: 114.5'
- 10'-0" TALL FOUNDATION WALLS
- 8" THICK CONC. WALLS UNLESS NOTED OTHERWISE. 10" THICK CONC. WALL ONLY WHERE NOTED
- WALL REBAR: HORIZONTAL (2) #4 REBAR TOP, MIDDLE, + BOTTOM. VERTICAL #5 REBAR EVERY 2'-0"
- 5/8" ANCHOR BOLTS 32" OC - 6" IN FROM CORNERS
- 8"x16" FTG (TYP) WITH (3) #4 REBAR, 2 LAYERS
- 4" CONC. SLAB

■ (P) - GIRT POCKET DEPTH VARIES

○ - 2'-6" x 2'-6" x 1'-0" (TYP)
LALLY COLUMN FOOTINGS
WITH (3) #4 REBAR, 2 LAYERS

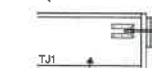


SECOND FLOOR2
SCALE: 3/16" = 1'-0"



CHECKLIST REVIEW 3-15-22

- (4) 8x6 PT POSTS
2x10 PT JOISTS @ 16" OC
(3) 2x10 GIRDER, BOTH SIDES
(2) 2x10 HEADER, FRONT & BACK
POSTS CLOSEST TO HOUSE
GET 2 POINTS OF CONTACT TO HOUSE
(SEE CUT SECTIONS C AND G FOR DETAILS)



1/2" THREADED ROD
3x3x1/4" PLATE WASHER & NUT
(2) 2x10 DECK JOISTS
DTT22 W/ 1/2" ROD & NUT
PAD OUT T.J1 W/ PLYWOOD ON
BOTH SIDES FOR NAILING.
USE (2) DTT22 DECK TENSION TIES
TO CONNECT DECK TO HOUSE.



FRONT ELEVATION
SCALE: 1/8" = 1'-0"



REAR ELEVATION
SCALE: 1/8" = 1'-0"



LEFT ELEVATION
SCALE: 1/8" = 1'-0"



RIGHT ELEVATION
SCALE: 1/8" = 1'-0"

Massachusetts Cultural Resource Information System

Scanned Record Cover Page

Inventory No: TRU.312
Historic Name: Pamet Life Saving Station
Common Name: Rothchild, V. Henry House
Address: 105 Castle Rd

City/Town: Truro
Village/Neighborhood: Great Hollow - Pamet;
Local No: 246; 46-1;
Year Constructed: C 1872
Architectural Style(s): Shingle Style;
Use(s): Lifesaving Station; Secondary Dwelling House; Single Family Dwelling House;
Significance: Architecture; Maritime History; Politics Government; Recreation;
Area(s): TRU.L
Designation(s):
Building Materials: Roof: Asphalt Shingle;
Wall: Wood; Wood Clapboard; Wood Flushboard; Wood Shingle;
Foundation: Concrete Unspecified;
Demolished No



The Massachusetts Historical Commission (MHC) has converted this paper record to digital format as part of ongoing projects to scan records of the Inventory of Historic Assets of the Commonwealth and National Register of Historic Places nominations for Massachusetts. Efforts are ongoing and not all inventory or National Register records related to this resource may be available in digital format at this time.

The MACRIS database and scanned files are highly dynamic; new information is added daily and both database records and related scanned files may be updated as new information is incorporated into MHC files. Users should note that there may be a considerable lag time between the receipt of new or updated records by MHC and the appearance of related information in MACRIS. Users should also note that not all source materials for the MACRIS database are made available as scanned images. Users may consult the records, files and maps available in MHC's public research area at its offices at the State Archives Building, 220 Morrissey Boulevard, Boston, open M-F, 9-5.

Users of this digital material acknowledge that they have read and understood the MACRIS Information and Disclaimer (<http://mhc-macris.net/macrisdisclaimer.htm>)

Data available via the MACRIS web interface, and associated scanned files are for information purposes only. THE ACT OF CHECKING THIS DATABASE AND ASSOCIATED SCANNED FILES DOES NOT SUBSTITUTE FOR COMPLIANCE WITH APPLICABLE LOCAL, STATE OR FEDERAL LAWS AND REGULATIONS. IF YOU ARE REPRESENTING A DEVELOPER AND/OR A PROPOSED PROJECT THAT WILL REQUIRE A PERMIT, LICENSE OR FUNDING FROM ANY STATE OR FEDERAL AGENCY YOU MUST SUBMIT A PROJECT NOTIFICATION FORM TO MHC FOR MHC'S REVIEW AND COMMENT. You can obtain a copy of a PNF through the MHC web site (www.sec.state.ma.us/mhc) under the subject heading "MHC Forms."

Commonwealth of Massachusetts
Massachusetts Historical Commission
220 Morrissey Boulevard, Boston, Massachusetts 02125
www.sec.state.ma.us/mhc

This file was accessed on: Thursday, May 26, 2022 at 9:07 AM

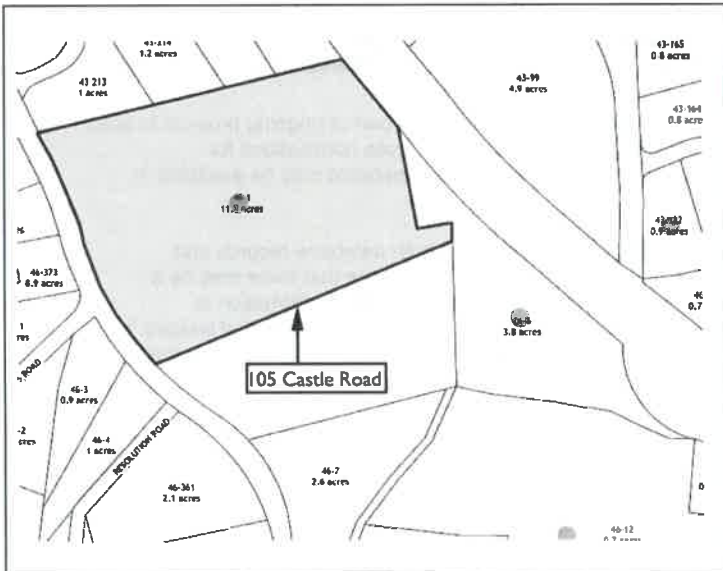
FORM B – BUILDING

MASSACHUSETTS HISTORICAL COMMISSION
MASSACHUSETTS ARCHIVES BUILDING
220 MORRISSEY BOULEVARD
BOSTON, MASSACHUSETTS 02125

Photograph



Topographic or Assessor's Map



Recorded by Laura Kline, Quinn R. Stuart, Blake McDonald

Organization: PAL

Date November 2010

Assessor's Number USGS Quad Area(s) Form Number

46-1

Wellfleet

TRU.L

TRU.312

Town Truro

Place Castle Hill

Address 105 Castle Road

Historic Name Pamet Life Saving Station

Uses Present: Residence

Original: Life Saving Station

Date of Construction ca. 1872

Source U.S. Life Saving Records

Style/Form Shingle

Architect/Builder Unknown

Exterior Material

Foundation: Concrete

Wall/Trim: Clapboard, wood shingle, vertical flush board

Roof: Asphalt shingle

Outbuildings/Secondary Structures

Studio with wood deck, ca. 1979

Garage

Studio, in ruins

Major Alterations

Conversion to residence, ca. 1940

Ell addition on west elevation and dormers, ca. 1930-1940

Addition on east elevation, ca. 1964

Condition Good

Moved ☐ no ☒ yes **Date** Late 1930s

Acreage 11.18 acres

Setting The house occupies a relatively level wooded lot set back from the road and faces south. The landscape immediately surrounding the house consists of a grassy lawn, tall shrubs and hedges, evergreens, and a variety of deciduous trees. Dense vegetation lines the long driveway.

RECEIVED

NOV 02 2011

MASS. HIST. COMM.

Follow Massachusetts Historical Commission Survey Manual instructions for completing this form.

INVENTORY FORM CONTINUATION SHEET

TRURO

105 Castle Road

MASSACHUSETTS HISTORICAL COMMISSION

220 MORRISSEY BOULEVARD, BOSTON, MASSACHUSETTS 02125

Area(s) Form No.

TRU.L

TRU.312

This updated inventory form is a supplement to the existing 1989 inventory form. PAL updated the cover sheet and architectural description in March 2011 based on a November 2010 survey.

ARCHITECTURAL DESCRIPTION

The former Pamet Life Saving Station at 105 Castle Road is a one-and-one-half-story Shingle-style building, originally constructed ca. 1872 and moved to its current location in the late 1930s. No visible alterations have been made to the house since it was last surveyed in 1989. The shed/cottage noted on the 1989 inventory form is now in ruins. The studio designed by Charles Zehnder is not visible from the house or on aerial images of the property.

INVENTORY FORM CONTINUATION SHEET

MASSACHUSETTS HISTORICAL COMMISSION
220 MORRISSEY BOULEVARD, BOSTON, MASSACHUSETTS 02125

TRURO

105 Castle Road

Area(s) Form No.

TRUL	TRU.312
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PHOTOGRAPHS



Photograph 1.
View looking northwest
toward house from
driveway.



Photograph 2.
View looking west
toward house from
driveway.

INVENTORY FORM CONTINUATION SHEET

TRURO

105 Castle Road

MASSACHUSETTS HISTORICAL COMMISSION
220 MORRISSEY BOULEVARD, BOSTON, MASSACHUSETTS 02125

Area(s) Form No.

TRU.L	TRU.312
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PHOTOGRAPHS



Photograph 3.
View looking east
toward garage from
driveway.



Photograph 4.
View looking east
toward ruins of studio
located east of house.

FORM B - BUILDING

MASSACHUSETTS HISTORICAL COMMISSION
10 BOYLSTON STREET
BOSTON, MA 02116

AREA

FORM NO.

L

312

246-248

Pl - Street
Hobbs

Town

Truro

Address

105 Castle Rd

Historic Name

Pamet Life Saving Station

Use: Present

residence

Original

Life saving station

DESCRIPTION

Date

c.1872

Source

U.S. Life Saving records

Style

Queen Anne/shingle

Architect

Exterior Wall Fabric

decorative shingles

Outbuildings

large shed/cottage,

garage

Major Alterations (with dates)

converted to residence, new windows, ells, etc.

c.1940

Condition

good

Moved

yes

Date

late 1930's

Acreage

4.73

Setting

Long drive leads to a clearing

in the woods; house to left (north),

garage and cottage to east

Recorded by

M. Landry

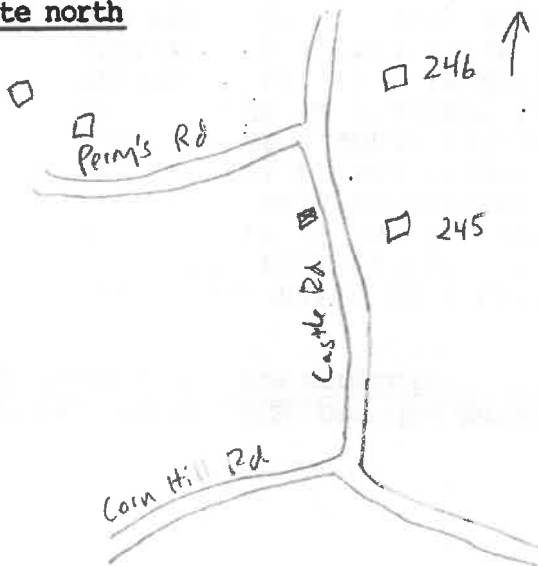
Organization

for Truro Hist. Comm.

Date

Sept. 1989

Sketch Map: Draw map showing property's location in relation to nearest cross streets and/or geographical features. Indicate all buildings between inventoried property and nearest intersection(s). Indicate north



UTM REFERENCE

USGS QUADRANGLE

Wellfleet

SCALE

1:25000

NATIONAL REGISTER CRITERIA STATEMENT (if applicable)

ARCHITECTURAL SIGNIFICANCE Describe important architectural features and evaluate in terms of other buildings within the community.

Originally built as a Life Saving Station in 1872, this house retains its basic form as well as a great deal of the exterior decorative details. It is one of several maritime related buildings in Truro that have been converted into residences. The major alteration was the removal of the large doors used to move equipment in and out, and the addition of a small ell, a dormer, a larger northeast ell, and several windows. It is possible that the larger ell, and the cottage, were out-buildings of the Life Saving Station and moved at the same time. This station was identical to eight other stations built at the same time along the Cape coast. They all had large, broad roofs, gable overhangs, and decorative shingles, as well as observation towers (also removed from this house). This is the only one to survive in Truro.

HISTORICAL SIGNIFICANCE Explain the role owners played in local or state history and how the building relates to the development of the community.

In 1872 the U.S. government authorized the U.S. Life Saving Service and ordered the construction of nine stations along the Cape Cod coastline. These were built that year and manned by the winter of '72. Located approximately five miles apart, they had small halfway huts in between. The beaches were patrolled from August 1st to June 1st by a crew that lived in the station. The stations also held equipment and usually had several outbuildings for horses, boats, etc. The Life Saving Service joined the Coast Guard in 1915. This was the Pamet Life Saving Station, located on Ballston Beach, and was moved in the 1930's after this service was terminated. It was converted into the summer residence of V. Henry Rothchild of New York City.

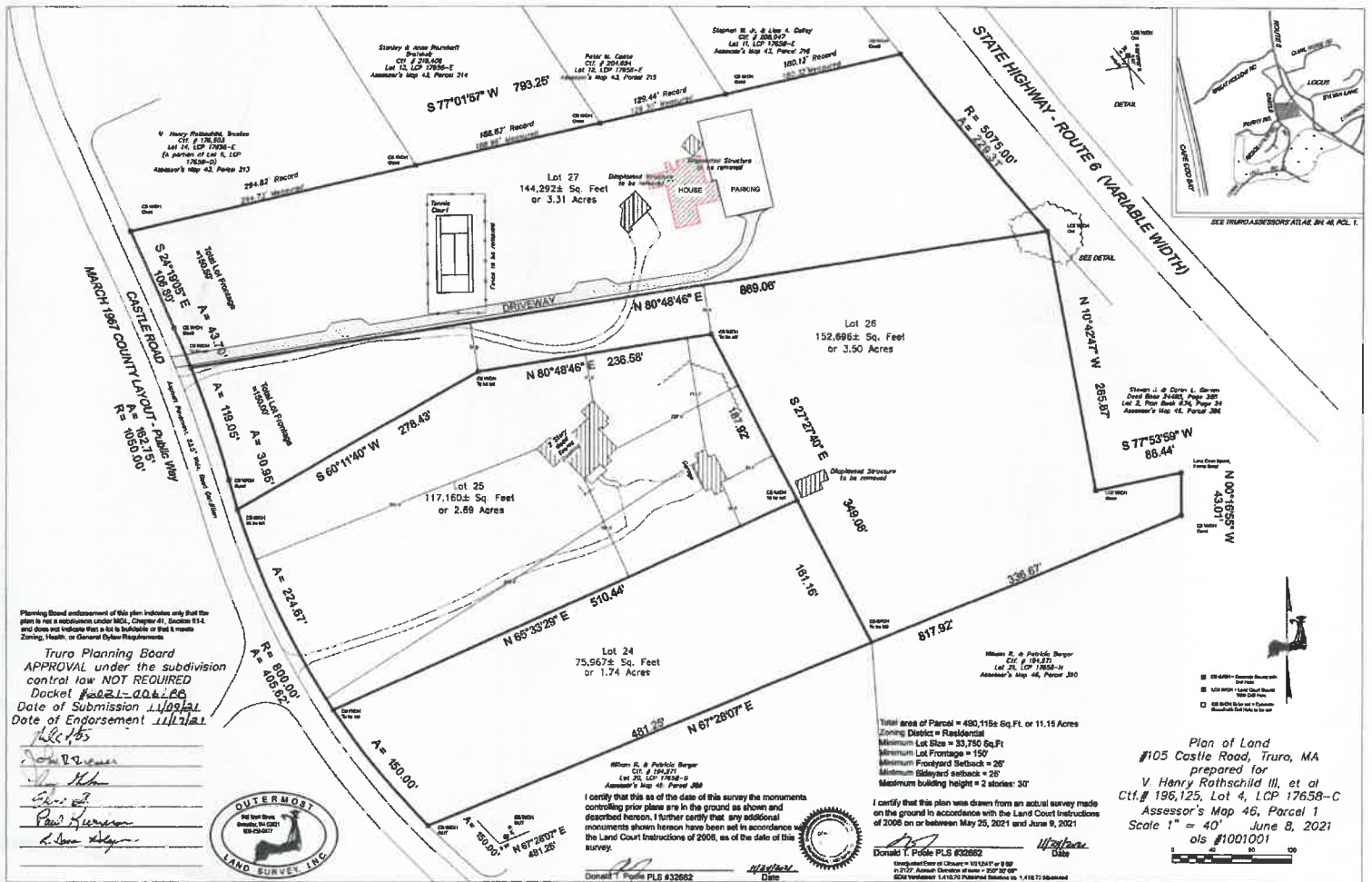
BIBLIOGRAPHY and/or REFERENCES

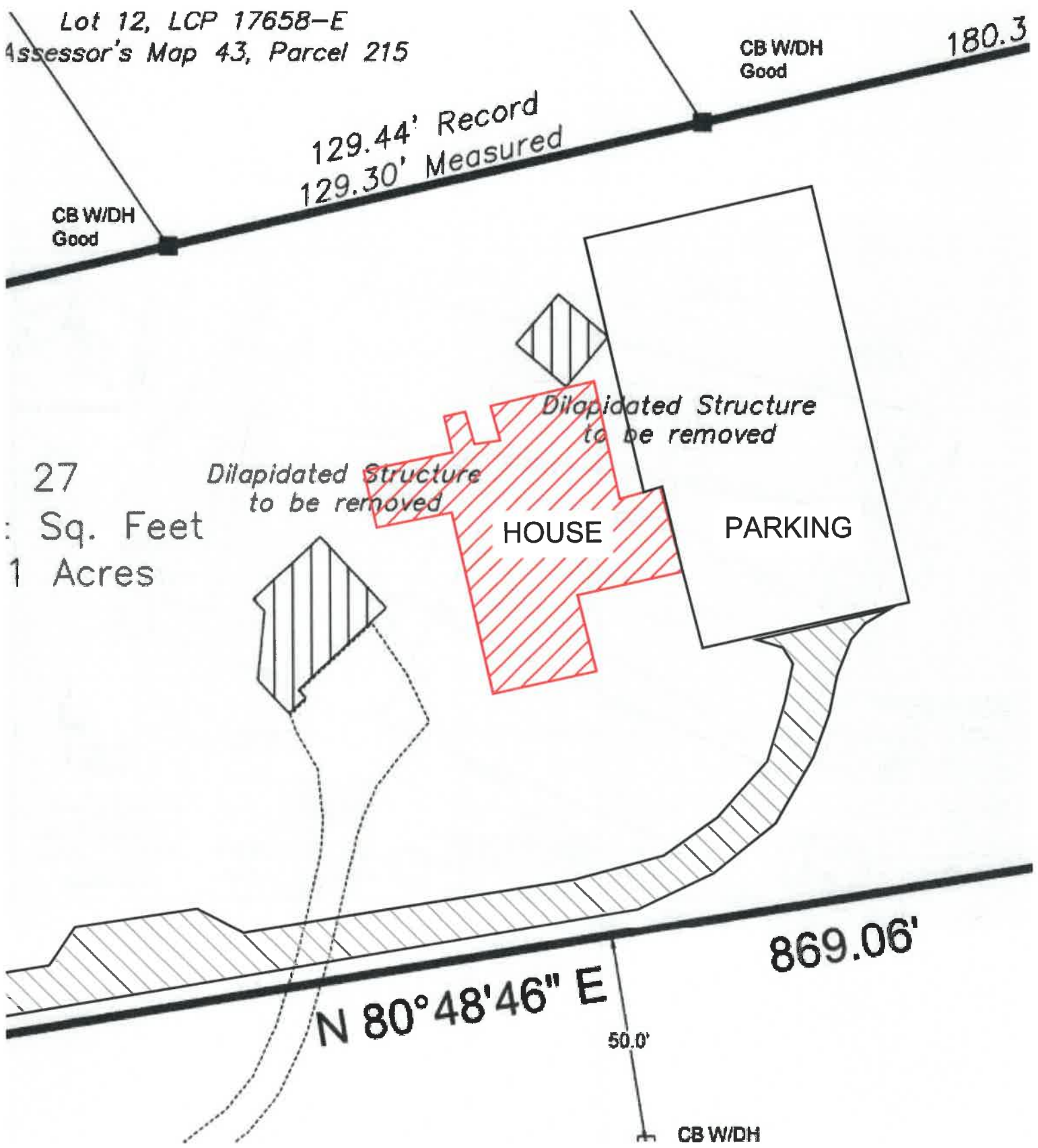
1901 Truro Directory
1860 census
A. Marshall "Truro, Cape Cod..."

1858 map
1880 map
1907 map

National Park Service, "The Lifesavers of Cape Cod", pamphlet
Edward Lenik, "The Truro Halfway House," in Hist. Archeology, 1972







Paul & Amy Holt
113 Castle Road, Truro
Charles Zehnder Studio Structure

Historic Commission Meeting
July 7, 2022

Home Intention/Design

Primary Year-Round Residence

Multigenerational Home

Architectural Style Compatible w/ Neighborhood

Sustainable

- Heat Pumps
- Solar Panel
- Vegetable

Community Involvement

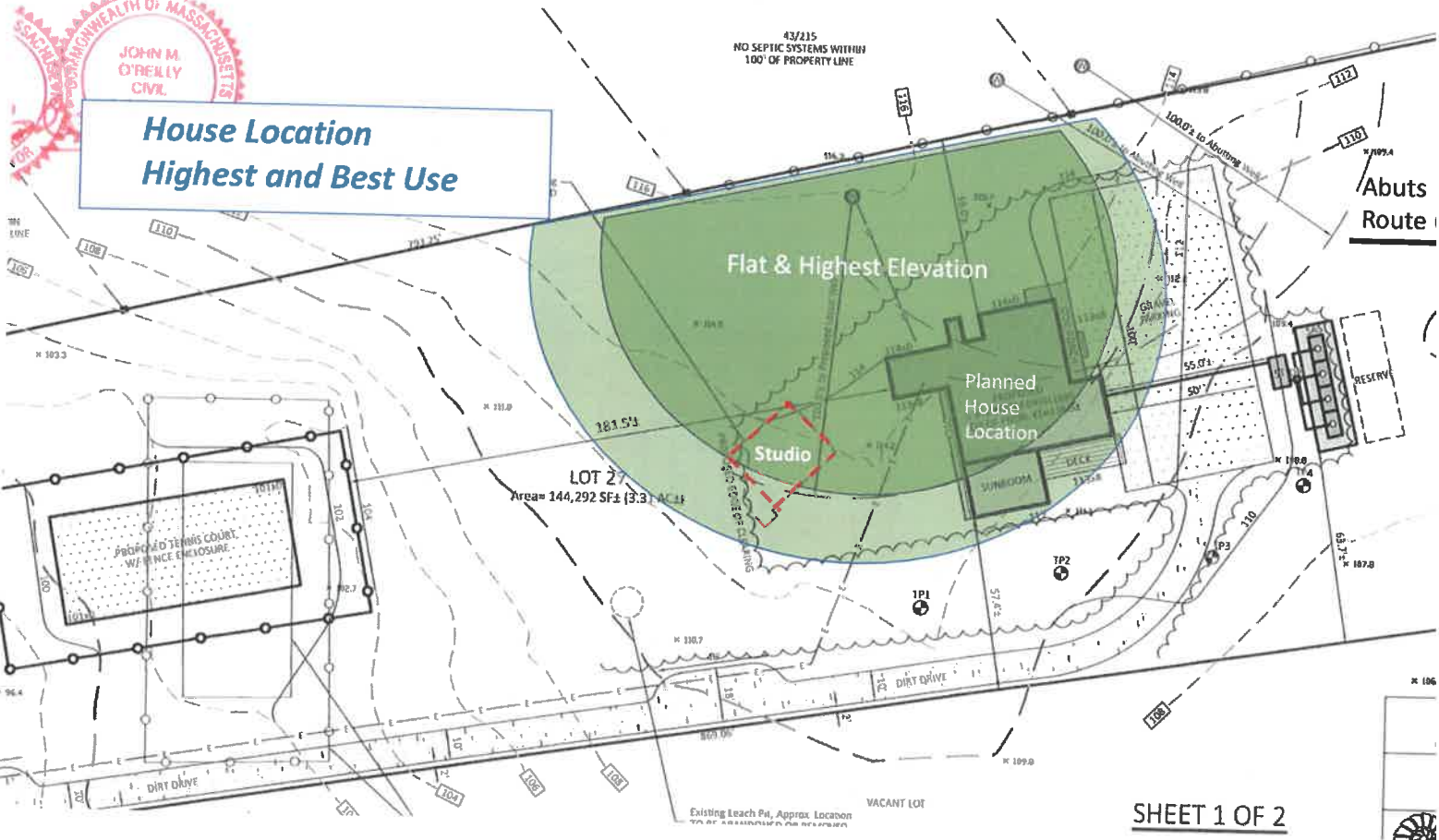


House Design

July 7th Commission Meeting
Paul & Amy Holt 113 Castle Road, Truro



**House Location
Highest and Best Use**

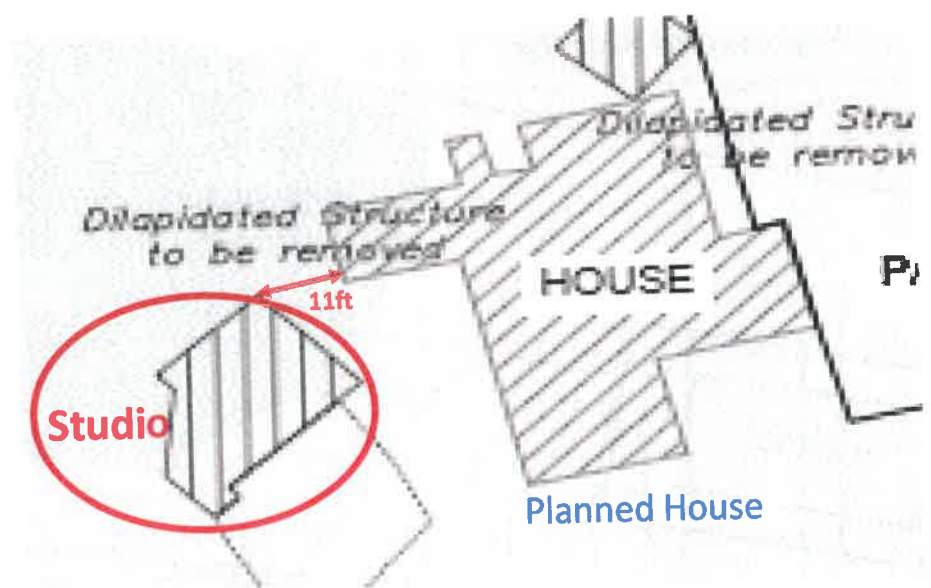


Studio Proximity to Proposed House

Studio is located 11ft from
House

- Inadequate space to dig
foundation in the
designed location

See next slide



July 7th Commission Meeting
Paul & Amy Holt 113 Castle Road, Truro

*Studio Proximity
to Proposed House*

Side of the Studio facing the house



Studio's Dilapidated State

Collapsed Roof

Studio can NOT be moved without a roof



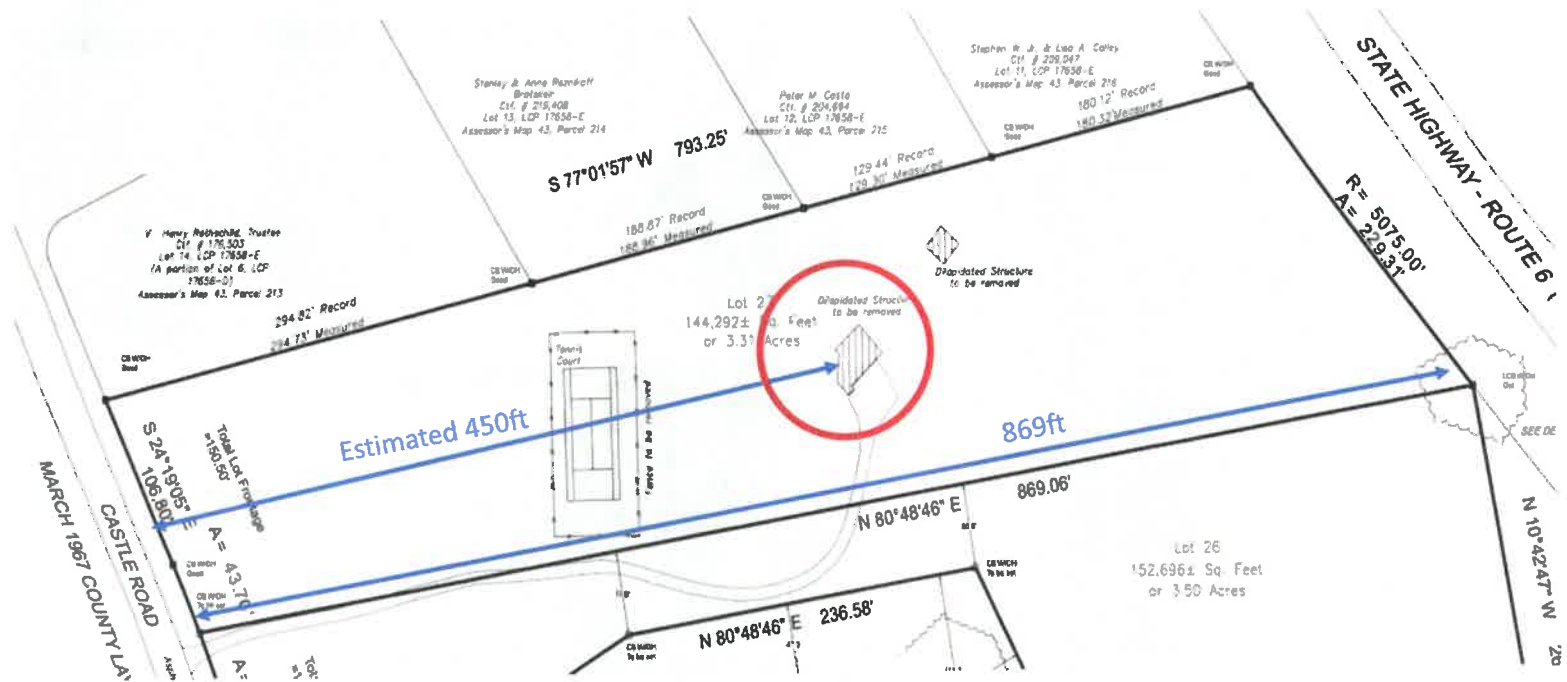
Studio's Dilapidated State

Broken Windows, & Glass Sliders

Broken Wood Stair & Lookout



Studio Not Visible From the Street



Honoring Charles Zehnder

- A sign and bird house designed to represent the design intent of the studio structure.



July 7th Commission Meeting
Paul & Amy Holt 113 Castle Road, Truro

