

August 2022

Mr. Nicholas Moreno
Boston Conservation Commission
1 City Hall Square, Room 709
Boston, MA 02201

Re: Harbor Towers Seawall Rehab DEP File Number 006-1781 – Request for Certificate of Compliance

Dear Mr. Moreno,

The work identified in the above-referenced DEP File Number is now complete. As required, in accordance with General Condition 12, please find the attached completed WPA Form 8A Request for Certificate of Compliance for this project. I, as a representative of Childs Engineering Corporation visited the site on a regular basis to inspect and confirm that the work is substantially completed in compliance with the plans submitted to the Conservation Commission and the Order of Conditions.

If you have any questions or require additional information, please do not hesitate to contact the undersigned at cavanaughr@childseng.com.

Respectfully submitted,

CHILDS ENGINEERING CORPORATION



Ryan M. Cavanaugh, P.E.
Project Engineer



Massachusetts Department of Environmental Protection
 Bureau of Resource Protection - Wetlands
WPA Form 8A – Request for Certificate of Compliance
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

DEP File Number:

Provided by DEP

A. Project Information

Important:
 When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Upon completion of the work authorized in an Order of Conditions, the property owner must request a Certificate of Compliance from the issuing authority stating that the work or portion of the work has been satisfactorily completed.

1. This request is being made by:

Brian Buhler
 Name
Harbor Towers I Condominium Trust
 Mailing Address
Boston MA 02110
 City/Town State Zip Code
(617) 723-2090
 Phone Number

2. This request is in reference to work regulated by a final Order of Conditions issued to:

Harbor Towers I Condominium Trust
 Applicant
06/22/2021 006-1781
 Dated DEP File Number

3. The project site is located at:

85 East India Row Boston
 Street Address City/Town
03 2968
 Assessors Map/Plat Number Parcel/Lot Number

4. The final Order of Conditions was recorded at the Registry of Deeds for:

Harbor Towers I Condominium Trust
 Property Owner (if different)
Suffolk 65730 156
 County Book Page
 Certificate (if registered land)

5. This request is for certification that (check one):

- the work regulated by the above-referenced Order of Conditions has been satisfactorily completed.
 the following portions of the work regulated by the above-referenced Order of Conditions have been satisfactorily completed (use additional paper if necessary).

- the above-referenced Order of Conditions has lapsed and is therefore no longer valid, and the work regulated by it was never started.



WPA Form 8A – Request for Certificate of Compliance

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

Provided by DEP

A. Project Information (cont.)

6. Did the Order of Conditions for this project, or the portion of the project subject to this request, contain an approval of any plans stamped by a registered professional engineer, architect, landscape architect, or land surveyor?

Yes

If yes, attach a written statement by such a professional certifying substantial compliance with the plans and describing what deviation, if any, exists from the plans approved in the Order.

No

B. Submittal Requirements

Requests for Certificates of Compliance should be directed to the issuing authority that issued the final Order of Conditions (OOC). If the project received an OOC from the Conservation Commission, submit this request to that Commission. If the project was issued a Superseding Order of Conditions or was the subject of an Adjudicatory Hearing Final Decision, submit this request to the appropriate DEP Regional Office (see <http://www.mass.gov/eea/agencies/massdep/about/contacts/find-the-massdep-regional-office-for-your-city-or-town.html>).



August 11, 2022

Ryan M. Cavanaugh, P.E.
Childs Engineering Corporation
34 William Way
Bellingham, MA 02019

RE: Response to BCC OOC Condition 72

Dear Ryan,

As indicated in the Notice of Intent, the project consists of repairing the existing granite seawall by filling voids and repointing the joints along a 142-foot section of the wall, resetting the top stones and filling an area of washout below the reset capstones with grout. The purpose of the work is to maintain the seawall for the continued structural support of the Harborwalk and public use space above. This project does not alter the seawall's ability to manage stormwater, runoff, or flooding. The repairs do not entirely seal the seawall or affect the ability of water to drain. Harbor Towers has no plans to alter the height or geometry of the existing seawalls.

Harbor Towers is in the process of developing a system to protect the interior of the two residential structures on the property from future sea level rise and coastal flooding. The protective system currently under study will be completely contained within the limits of the existing buildings. No portion of the system will extend outside the footprint of the current buildings.

Harbor Towers is also participating in studies by the Wharf District Council (WDC), designed to protect our campus and surrounding properties. The WDC study builds on the conceptual recommendations contained in the City of Boston Climate Ready Boston Reports entitled "Coastal Resilience Solutions for Downtown Boston and North End, and Coastal Resilience Solutions for South Boston". Trustee representatives from Harbor Towers are actively participating as part of the WDC Coastal Resiliency Task Force Management Team. The study will include the Harbor Towers Property and, details of the WDC study currently underway can be found at:

https://www.wharfdistrictcouncil.org/_files/ugd/c2d761_8fe33abe99b24861b630ae05549fc3c7.pdf

If you have any further Questions, please do not hesitate to reach out to this office.

Sincerely,

A handwritten signature in black ink, appearing to read "Brian Buhler", with a long, sweeping underline.

Brian Buhler
General Manager



**AFFIDAVIT OF SERVICE
FOR ABUTTER NOTIFICATION**

**Under the Massachusetts Wetlands Protection Act
and Boston Wetlands Ordinance**

I, Ryan Cavanaugh, hereby certify under pains and penalties of perjury that that at least one week prior to the public hearing, I gave notice to abutters in compliance with the second paragraph of Massachusetts General Laws Chapter 131, section 40, and the DEP Guide to Abutter Notification dated April 8, 1994, in connection with the following matter:

A Request for a Certificate of Compliance was filed under the Massachusetts Wetlands Protection Act and/or the Boston Wetlands Ordinance by Ryan Cavanaugh for Harbor Towers I Condominium Trust; Brian Buhler located at 85 East India Row.

The Abutter Notification For, the list of abutters to whom it was given, and their addresses are attached to this Affidavit of Service.

Ryan Cavanaugh Digitally signed by Ryan Cavanaugh
DN: CN = Ryan Cavanaugh, email =
rcavanaugh@childseng.com C = US O = Childs
Engineering
Date: 2022.09.28 15:12:30 -0500

Name

06/28/2022

Date



City of Boston
Environment



City of Boston
Mayor Martin J. Walsh

**NOTIFICATION TO ABUTTERS
BOSTON CONSERVATION COMMISSION**

In accordance with the Massachusetts Wetlands Protection Act, Massachusetts General Laws Chapter 131, Section 40, and the Boston Wetlands Ordinance, you are hereby notified as an abutter to a project filed with the Boston Conservation Commission.

A. Barkan Management Company has filed a Certificate of Compliance with the Boston Conservation Commission seeking permission to alter an Area Subject to Protection under the Wetlands Protection Act (General Laws Chapter 131, section 40) and Boston Wetlands Ordinance.

B. The address of the lot where the activity is proposed is 85 East India Row, Boston MA.

C. The project involves making repairs to the existing seawalls that border the property at 85 East India Row and Boston Harbor. The repairs shall consist of filling voids and repointing joints in the seawall and removing and resetting the granite capstones along the top of the wall.

D. Copies of the Notice of Intent may be obtained by contacting the Boston Conservation Commission at CC@boston.gov.

E. Copies of the Notice of Intent may be obtained from the **Ryan Cavanaugh (Representative)** at Cavanaughr@childseng.com between the hours of **8am to 4pm, Monday through Friday**.

F. In accordance with the Commonwealth of Massachusetts Executive Order Suspending Certain Provisions of the Open Meeting Law, the public hearing will take place **virtually** at <https://zoom.us/j/6864582044>. If you are unable to access the internet, you can call 1-929-205- 6099, enter Meeting ID 686 458 2044 # and use # as your participant ID.

G. Information regarding the date and time of the public hearing may be obtained from the **Boston Conservation Commission** by emailing CC@boston.gov or calling **(617) 635-3850** between the hours of **9 AM to 5 PM, Monday through Friday**.

NOTE: Notice of the public hearing, including its date, time, and place, will be published at least five (5) days in advance in the **Boston Herald**.

NOTE: Notice of the public hearing, including its date, time, and place, will be posted on www.boston.gov/public-notices and in Boston City Hall not less than forty-eight (48) hours in advance.

NOTE: If you would like to provide comments, you may attend the public hearing or send written comments to CC@boston.gov or Boston City Hall, Environment Department, Room 709, 1 City Hall Square, Boston, MA 02201

NOTE: You also may contact the Boston Conservation Commission or the Department of Environmental Protection Northeast Regional Office for more information about this application or the Wetlands Protection Act. To contact DEP, call: the Northeast Region: (978) 694-3200.

CITY of BOSTON

1 CITY HALL SQUARE BOSTON, MA 02201-2021 | ROOM 709 | 617-635-3850 | ENVIRONMENT@BOSTON.GOV



BABEL NOTICE

English:

IMPORTANT! This document or application contains **important information** about your rights, responsibilities and/or benefits. It is crucial that you understand the information in this document and/or application, and we will provide the information in your preferred language at no cost to you. If you need them, please contact us at cc@boston.gov or 617-635-3850.

Spanish:

¡IMPORTANTE! Este documento o solicitud contiene **información importante** sobre sus derechos, responsabilidades y/o beneficios. Es fundamental que usted entienda la información contenida en este documento y/o solicitud, y le proporcionaremos la información en su idioma preferido sin costo alguno para usted. Si los necesita, póngase en contacto con nosotros en el correo electrónico cc@boston.gov o llamando al 617-635-3850.

Haitian Creole:

AVI ENPÒTAN! Dokiman oubyen aplikasyon sa genyen **enfòmasyon ki enpòtan** konsènan dwa, responsablite, ak/oswa benefis ou yo. Li enpòtan ke ou konprann enfòmasyon ki nan dokiman ak/oubyen aplikasyon sa, e n ap bay enfòmasyon an nan lang ou prefere a, san ou pa peye anyen. Si w bezwen yo, tanpri kontakte nou nan cc@boston.gov oswa 617-635-3850.

Traditional Chinese:

非常重要！這份文件或是申請表格包含關於您的權利，責任，和／或福利的重要信息。請您務必完全理解這份文件或申請表格的全部信息，這對我們來說十分重要。我們會免費給您提供翻譯服務。如果您有需要請聯系我們的郵箱 cc@boston.gov 電話# 617-635-3850..

Vietnamese:

QUAN TRỌNG! Tài liệu hoặc đơn yêu cầu này chứa **thông tin quan trọng** về các quyền, trách nhiệm và/hoặc lợi ích của bạn. Việc bạn hiểu rõ thông tin trong tài liệu và/hoặc đơn yêu cầu này rất quan trọng, và chúng tôi sẽ cung cấp thông tin bằng ngôn ngữ bạn muốn mà không tính phí. Nếu quý vị cần những dịch vụ này, vui lòng liên lạc với chúng tôi theo địa chỉ cc@boston.gov hoặc số điện thoại 617-635-3850.

Simplified Chinese:

非常重要！这份文件或是申请表格包含关于您的权利，责任，和／或福利的重要信息。请您务必完全理解这份文件或申请表格的全部信息，这对我们来说十分重要。我们会免费给您提供翻译服务。如果您有需要请联联系我们的邮箱 cc@boston.gov 电话# 617-635-3850.

Cape Verdean Creole:

INPURTANTI! Es dukumentu ó aplikason ten **informason inpur tanti** sobri bu direitus, rasponsabilidadi i/ó benefisius. Ê krusial ki bu intendi informason na es dukumentu i/ó aplikason ó nu ta da informason na língua di bu preferênsia sen ninhun kustu pa bó. Si bu prisiza del, kontata-nu na cc@boston.gov ó 617-635-3850.

Arabic:

مهم! يحتوي هذا المستند أو التطبيق على معلومات مهمة حول حقوقك ومسؤولياتك أو فوائدك. من الأهمية أن تفهم المعلومات الواردة في هذا المستند أو التطبيق. سوف نقدم المعلومات بلغتك المفضلة دون أي تكلفة عليك. إذا كنت في حاجة إليها، يرجى الاتصال بنا على cc@boston.gov أو 617-635-3850.

Russian:

ВАЖНО! В этом документе или заявлении содержится **важная информация** о ваших правах, обязанностях и/или льготах. Для нас очень важно, чтобы вы понимали приведенную в этом документе и/или заявлении информацию, и мы готовы бесплатно предоставить вам информацию на предпочитаемом вами языке. Если Вам они нужны, просьба связаться с нами по адресу электронной почты cc@boston.gov, либо по телефону 617-635-3850.

Portuguese:

IMPORTANTE! Este documento ou aplicativo contém **Informações importantes** sobre os seus direitos, responsabilidades e/ou benefícios. É importante que você compreenda as informações contidas neste documento e/ou aplicativo, e nós iremos fornecer as informações em seu idioma de preferência sem nenhum custo para você. Se precisar deles, fale conosco: cc@boston.gov ou 617-635-3850.

French:

IMPORTANT ! Ce document ou cette demande contient des **informations importantes** concernant vos droits, responsabilités et/ou avantages. Il est essentiel que vous compreniez les informations contenues dans ce document et/ou cette demande, que nous pouvons vous communiquer gratuitement dans la langue de votre choix. Si vous en avez besoin, veuillez nous contacter à cc@boston.gov ou au 617-635-3850.





City of Boston
Environment



City of Boston
Mayor Martin J. Walsh

波士顿湿地保护委员会

项目邻近住户通知

根据《马萨诸塞州湿地保护法》、《马萨诸塞州普通法》第 131 章第 40 节以及《波士顿湿地条例》的规定，我们特此向您，即向波士顿湿地保护委员会提出申请的项目的邻近住户，发出以下通知。

A. **BARKAN MANAGEMENT COMPANY** 已向波士顿湿地保护委员会提出申请，请求批准改建一块受《湿地保护法》（《普通法》第 131 章第 40 节）和《波士顿湿地条例》保护的地块。

B. 拟开展改建活动的地块地址为: **85 EAST INDIA ROW, BOSTON, MA.**

C. 该项目涉及以下建设内容: 該項目涉及對現有的海堤進行修補, 這些海堤是東印度街85號的建築物 (85 East India Row) 及波士頓港 (Boston Harbor) 間的邊界。修補工作包括填補海堤的孔隙和重嵌接縫, 以及沿著海堤的頂部拆除並重新安裝花崗岩頂石。

D. 可通過聯繫波士頓保護委員會取得意向通知書的副本, 電子郵件是 CC@boston.gov。

E. 您可于 **8AM TO 4PM, MONDAY THROUGH FRIDAY** 在 **RYAN CAVANAUGH (REPRESENTATIVE) AT CAVANAUGH@CHILDSENG.COM** 处获取 意向通知的副本。

F. 根據《馬薩諸塞州行政命令》(暫緩執行《公開會議法》) 聽證會將在網 上 <https://zoom.us/j/6864582044> 進行。如果無法上互聯網 (Internet), 則可致電 1-929-205-6099, 輸入會議編號(ID) 686 458 2044#, 然後使用#作為您參與的編號 (ID.)

G. 您可于**周一至周五上午 9 点到下午 5 点**联系**波士顿湿地保护委员会**, 咨询公开听证会举行的日期和时间, 邮箱地址: CC@boston.gov, 电话: (617) 635-4416。

注:公开听证会的通知(包括其举行日期、时间和地点)将提前至少五天在《波士顿先驱报》上予以公布。

注:公开听证会的通知(包括其举行日期、时间和地点)将提前至少四十八(48)小时发布在以下网页之上以及波士顿市政厅内:www.boston.gov/public-notice。如果您想提出意见或建议,您可以参加该公开听证会或将书面形式的意见或建议发送至 CC@boston.gov 或邮寄至以下地址: Boston City Hall, Environment Department, Room 709, 1 City Hall Square, Boston, MA 02201。

注:您也可以联系波士顿湿地保护委员会或环境保护部东北地区办公室, 咨询有关此项申请或《湿地保护法》的更多信息。如要联系环境保护部, 请致电: 东北地区: (978) 694-3200。

注:如果您准备参加该公开听证会并需要口译服务, 则请在听证会举行前一天中午 12 点前通过以下电子邮箱地址告知工作人员: CC@boston.gov。

CITY of BOSTON

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List of Abutters
(300 ft radius around Harbor Towers Construction Site)

Harbor Towers Seawall Rehabilitation
June 30, 2022

PARCEL NUMBER	ADDRESSEE	MAILING (ADDRESS)	MAILING (CITY, STATE)	MAILING (ZIPCODE)	LOCATION (ADDRESS)	LOCATION (CITY)	LOCATION (ZIPCODE)
302961000	20 ROWES WHARF TH 5 LLC	206 CHESTNUT ST	CHESTNUT HILL, MA	02110	10 ROWES WHARF 1001	BOSTON	02445
302961000	ALFRED WHITE QTIP TRUST	32 SOUTHPORT DR	MASHPEE, MA	02110	10 ROWES WHARF 1002	BOSTON	02649
302961000	ALOISI ANDREW	20 ROWES WHARF #405	BOSTON, MA	02043	10 ROWES WHARF 1003	BOSTON	02110
302961000	ARAKELIAN CHARLES P TS	20 ROWES WHARF # 307	BOSTON, MA	02110	10 ROWES WHARF 1101	BOSTON	02110
302961000	BANNICK WILLIAM B	10 SHIPYARD DR #212	HINGHAM, MA	02110	10 ROWES WHARF 1102	BOSTON	02043
302961000	BARRY GIOIA M	20 ROWES WHARF #PH05	BOSTON, MA	02110	10 ROWES WHARF 1201	BOSTON	02110
302961000	BEARS WHARF LLC	C/O EDWARD LADD	WILSON, WY	02110	10 ROWES WHARF 1203	BOSTON	83014
302990010	BOSTON REDEVELOPMENT AUTH	1 CITY HALL PLZ	BOSTON, MA	02493	10 ROWES WHARF 1401	BOSTON	02201
302961000	BURKE JOSEPH H	20 ROWES WHARF #TH11	BOSTON, MA	32963	10 ROWES WHARF 1402	BOSTON	02110
302961000	BURR JONATHAN L	20 ROWES WHARG #603	BOSTON, MA	02110	10 ROWES WHARF 1404	BOSTON	02110
302961000	BYRNE ARTHUR P	50 SAGO PALM ROAD	VERO BEACH, FL	02110	10 ROWES WHARF 801	BOSTON	32963
302961000	CAJ LLC	125 HIGH STREET	BOSTON, MA	02110	10 ROWES WHARF 802	BOSTON	02110
302961000	CELIKOL SINASI	20 ROWES WHARF #601	BOSTON, MA	02110	10 ROWES WHARF 803	BOSTON	02110
302961000	CHARM STANLEY E TS	10 ROWES WHARF #PH04	BOSTON, MA	33483	10 ROWES WHARF 901	BOSTON	02110
302961000	COHEN MICHAEL S	20 ROWES WHARF PH-7	BOSTON, MA	02110	10 ROWES WHARF 902	BOSTON	02110
302961000	COTTON HARVEY	20 ROWES WHARF #605	BOSTON, MA	02110	10 ROWES WHARF 903	BOSTON	02110
302961000	COVENEY ANNE M	66 SIMONS RD UNIT E	MASHPEE, MA	33480	10 ROWES WHARF PH01	BOSTON	02649
302961000	DEMAKES ANDREW	20 ROWES WHARF #704	BOSTON, MA	02110	10 ROWES WHARF PH02	BOSTON	02110
302961000	DEMAKES TIMOTHY	20 ROWES WHARF #302	BOSTON, MA	02110	10 ROWES WHARF PH03	BOSTON	02110
302961000	DORE TERESA L	20 ROWES WHARF #TH-06	BOSTON, MA	02110	10 ROWES WHARF PH04	BOSTON	02110
302961000	ELTERICH STEVEN	25 SMITHS POINT RD	MANCHESTER, MA	02110	10 ROWES WHARF PH05	BOSTON	01944
302961000	ESTORIL CORPORATION	206 ALLANDALE RD 3C	CHESTNUT HILL, MA	02110	10 ROWES WHARF PH06	BOSTON	02467
302961000	FALZONE MARK M	10 ROWES WHARF #PH02	BOSTON, MA	02110	20 ROWES WHARF 301	BOSTON	02110
302961000	FARO A JOSEPH	20 ROWES WHARF #308	BOSTON, MA	02110	20 ROWES WHARF 302	BOSTON	02110
302961000	FLUDDER STEVEN M	20 ROWES WHARF #701	BOSTON, MA	02109	20 ROWES WHARF 304	BOSTON	02110
302961000	FOURTEEN-04 ROWES WHARF TRUST	10 ROWES WHARF UNIT 1404	BOSTON, MA	02110	20 ROWES WHARF 305	BOSTON	02110
302961000	FRANK A LOPICCOLO 2017 TRUST	20 ROWES WHARF #506	BOSTON, MA	02110	20 ROWES WHARF 306	BOSTON	02110
303930010	FROG POND FOUNDATION INC	11 KEEWAYDIN DRIVE SUITE 100	SALEM, NH	02110	20 ROWES WHARF 307	BOSTON	03079
302961000	FULCHINO PAUL E TS	2643 SHELTINGHAM DR	WELLINGTON, FL	02110	20 ROWES WHARF 308	BOSTON	33414
302961000	GALE FREDERICK K	20 ROWES WHARF #310	BOSTON, MA	02110	20 ROWES WHARF 309	BOSTON	02110
302961000	GASPARRO PAUL M	20 ROWES WHARF #606	BOSTON, MA	02110	20 ROWES WHARF 310	BOSTON	02110
302961000	GERAGHTY ANNE C	PO BOX 5245/SIERRA RD	READVILLE, MA	02467	20 ROWES WHARF 402	BOSTON	02137
302961000	HAMM ROGER L	PO BOX 676351	RANCHO SANTE FE, CA	11733	20 ROWES WHARF 403	BOSTON	92067
302961000	HAN JIWON	10 ROWES WHARF #803	BOSTON, MA	02110	20 ROWES WHARF 404	BOSTON	02110
302961000	HATEM DAVID J	20 ROWES WHARF #505	BOSTON, MA	02110	20 ROWES WHARF 405	BOSTON	02110
302961000	IZZO ROBERT A	20 ROWES WHARF #10	BOSTON, MA	02110	20 ROWES WHARF 406	BOSTON	02110
302961000	JACOBS MARY M	901 PARK PZ	WEXFORD, PA	02137	20 ROWES WHARF 407	BOSTON	15090
302961000	JAMES P ROSENFELD 1995 TRUST	20 ROWES WHARF, UNIT 309	BOSTON, MA	02114	20 ROWES WHARF 408	BOSTON	02110
302961000	JANICE S CROWLEY REALTY TRUST	PO BOX 849	MARLBOROUGH, MA	02110	20 ROWES WHARF 409	BOSTON	01752
302961000	JONES PATRICK T	20 ROWES WHARF #501	BOSTON, MA	02492	20 ROWES WHARF 410	BOSTON	02110
302961000	JUDITH C PETERSON 2005	20 ROWES WHARF #409	BOSTON, MA	02110	20 ROWES WHARF 501	BOSTON	02110
302961000	KIMBERLIE T SACHS REVOCABLE TRUST	10 ROWES WHARF UNIT 903	BOSTON, MA	02649	20 ROWES WHARF 502	BOSTON	02110
302961000	LARIVEE JOHN J TS	20 ROWES WHARF #TH-14	BOSTON, MA	02110	20 ROWES WHARF 503	BOSTON	02110
302961000	LATORRE JAMES	300 BOYLSTON STREET UNIT 701	BOSTON, MA	15090	20 ROWES WHARF 504	BOSTON	02116
302961000	LESTER LARRY D	180 ASH PL	WESTON, MA	02110	20 ROWES WHARF 505	BOSTON	02493
302961000	LEWIS HENRY R	90 CANAL ST	BOSTON, MA	02110	20 ROWES WHARF 506	BOSTON	02114
302961000	LI CHIANG	20 ROWES WHARF #507	BOSTON, MA	02110	20 ROWES WHARF 507	BOSTON	02110
302961000	LIOBA NOMINEE TRUST	ONE CAMBRIDGE CTR SUITE 406	CAMBRIDGE, MA	33414	20 ROWES WHARF 510	BOSTON	02142
302961000	LOCONTE CHRISTOPHER	4 COOK CIRCLE	MEDFORD, MA	02110	20 ROWES WHARF 601	BOSTON	02155
302961000	LUKE WILLIAM TS	20 ROWES WHARF #TH-12	BOSTON, MA	02155	20 ROWES WHARF 602	BOSTON	02110
302961000	MARGULIES ANNE HURLEY	20 ROWES WHARF #706	BOSTON, MA	02110	20 ROWES WHARF 603	BOSTON	02110
302961000	MCCARTHY DARLENE A	4 CALIFORNIA AV STE#103	FRAMINGHAM, MA	01985	20 ROWES WHARF 604	BOSTON	01701
302961000	MCCARTHY JEFFREY	20 ROWES WHARF, UNIT 607	BOSTON, MA	02110	20 ROWES WHARF 605	BOSTON	02110
302961000	MURRAY ROBERT W TS	27 CAMBRIDGE ST	BURLINGTON, MA	02110	20 ROWES WHARF 606	BOSTON	01803
302961000	NAHACZEWSKI STEPHEN M	10 ROWES WHARF #PH03	BOSTON, MA	02110	20 ROWES WHARF 607	BOSTON	02110
302990000	NEW ENGLAND AQUARIUM	248 ATLANTIC AV	BOSTON, MA	02110	20 ROWES WHARF 608	BOSTON	02110
302961000	NOGUEIRA GRACE	20 ROWES WHARF 404	BOSTON, MA	02110	20 ROWES WHARF 609	BOSTON	02110
302961000	PAO FRANK C	301 CHAPEL HILL RD	PALM BEACH, FL	02110	20 ROWES WHARF 610	BOSTON	33480

TRANSLATION CERTIFICATE

I, Muneebur Rahman, certify to the best of my knowledge and belief that the following is a true and accurate translation of the below-mentioned document(s) from English into Traditional Chinese completed under my supervision this 4th day of February, 2021.

Description of document(s): Notice regarding repairs to seawalls

Number of pages: 3

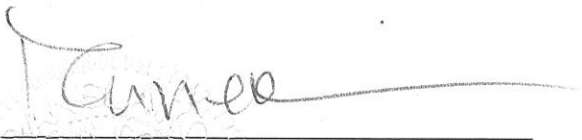
Including --

Translation certificate: 1 page

Translation: 1 page

Source: 1 page





SIGNATURE

On this 4th day of February, 2021, before me, the undersigned notary public, personally appeared Muneebur Rahman who proved to me through satisfactory evidence of identification, which were Massachusetts driver's license, to be the person who signed the above statement in my presence.


NOTARY PUBLIC'S SIGNATURE & SEAL



JENNIFER CANDIDA BORGES
Notary Public
Commonwealth of Massachusetts
My Commission Expires
December 25, 2026

該項目涉及對現有的海堤進行修補，這些海堤是東印度街 85 號的建築物（85 East India Row）及波士頓港 (Boston Harbor) 間的邊界。修補工作包括填補海堤的孔隙和重嵌接縫，以及沿著海堤的頂部拆除並重新安裝花崗岩頂石。



The project involves making repairs to the existing seawalls that border the property at 85 East India Row and Boston Harbor. The repairs shall consist of filling voids and repointing joints in the seawall and removing and resetting the granite capstones along the top of the wall.



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 FRAMINGHAM, MA 01701

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 Street: 15 NORTHERN AV
 City, State: BOSTON, MA 02210

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 Street: 10 ROWES WHARF #PH03
 City, State: BOSTON, MA 02110

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Street and	LUKE WILLIAM TS
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City, St	ANNE COLUMBIA/COLUMBIA GRP ONE CAMBRIDGE CTR SUITE 406 CAMBRIDGE, MA 02110
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Street and	LESTER LARRY D
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Sent To **FOUR HUNDRED ATLANTIC AV, LLC**

Street **C/O 400 ATL CUSHMAN/WAKEFIELD OF**

City, State **MA
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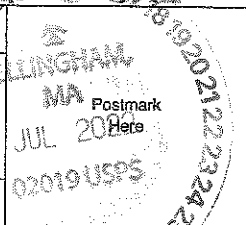
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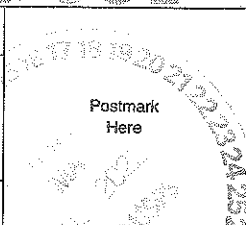
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DEMAKES ANDREW
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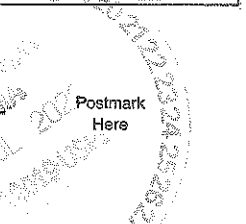
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Street and
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STEVENSON PHILIP D
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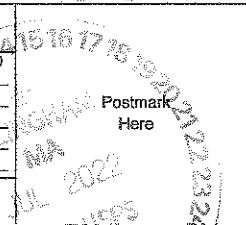
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SELLDORF FRANK R
C/O FRANK R SELLDORFF
10 ROWES WHARF #1203
BOSTON, MA 02110

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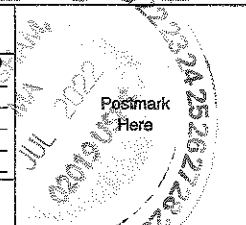
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Street
City, State

CAJ LLC
C/O HELLMAN JORDAN MANAGEMENT
CO., INC
125 HIGH STREET
BOSTON, MA 02110

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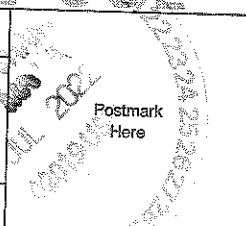
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Adult Signature Required \$

Adult Signature Restricted Delivery \$



Postage
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Total Po
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Sent To
Street and
City, State

THOMAS JEFFREY S
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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Postage	\$
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Sent To
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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Postage	\$
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DORE TERESA L
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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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Postage	\$
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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STEAMBOAT REALTY LLC
 92 STATE ST
 BOSTON, MA 2109

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Postage	\$
Total Post	\$

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DEMAKES TIMOTHY
 20 ROWES WHARF #302
 BOSTON, MA 02110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

Postage	\$
Total Post	\$

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 Street and
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ELTERICH STEVEN
 25 SMITHS POINT RD
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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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CHARM STANLEY E TS
10 ROWES WHARF #PH04
BOSTON, MA 02110

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<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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SNYDER BRADLEY W
C/OM BRADLEY W SNYDER
20 ROWES WHARF #PH08
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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ROWES WHARF LLC
940 INDIGO POINT
DELRAY BEACH, FL 33483

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark
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Postage \$

Total Postage \$

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Street and Ap

City, State, Zi

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COVENEY ANNE M
66 SIMONS RD UNIT E
MASHPEE, MA 02649

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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City, State, Zi

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SELLDORF FRANK R
C/O FRANK R SELLDORFF
10 ROWES WHARF #1203
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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SHUMAN JODY
10 ROWES WHARF #801
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total	\$

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SEIGEL FRED TS
C/O FRED SEIGEL
20 ROWES WHARF #707
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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total Post	\$

Sent To
Street and
City, State

COTTON HARVEY
20 ROWES WHARF #605
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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total Post	\$

Sent To
Street and
City, State

CHARM STANLEY E TS
10 ROWES WHARF #PHO4
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total Pr	\$

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SHANE JAMES H TS
20 ROWES WHARF #305
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total Po	\$

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MASHPEE, MA 2649

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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage	\$
Total Posta	\$

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Street and
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COHEN MICHAEL S
20 ROWES WHARF PH-7
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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$
Total Post \$

Sent To
ALFRED WHITE QTP TRUST
C/O CHRISTINE WHITE
32 SOUTHPORT DR
MASHPEE, MA 2649

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$
Total Post \$

Sent To
BEARS WHARF LLC
PO BOX 1461 6920 LUPINE TRAIL
C/O EDWARD LADD
WILSON, WY 83014

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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$
Total Post \$

Sent To
FRANK A LOPICCOLO 2017 TRUST
C/O FRANK A LOPICCOLO
20 ROWES WHARF #506
BOSTON, MA 02110

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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ARAKELIAN CHARLES P TS
C/O CHARLES P ARAKELIAN TS
20 ROWES WHARF # 307
BOSTON, MA 2110

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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

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Sent To
20 ROWES WHARF TH 5 LLC
206 CHESTNUT ST
CHESTNUT HILL, MA 2445

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<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$
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Sent To
BARRY GIOIA M
20 ROWES WHARF #PH05
BOSTON, MA 2110

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<input type="checkbox"/> Return Receipt (electronic)	\$
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Postage
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Total Postage
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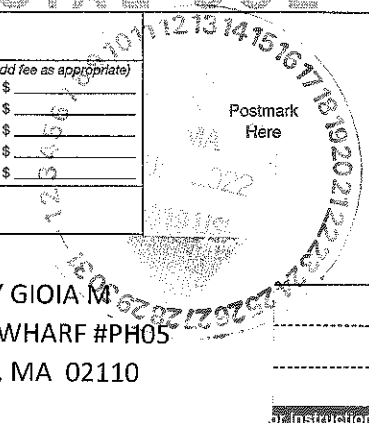
Sent To
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BARRY GIOIA M
20 ROWES WHARF #PH05
BOSTON, MA 02110



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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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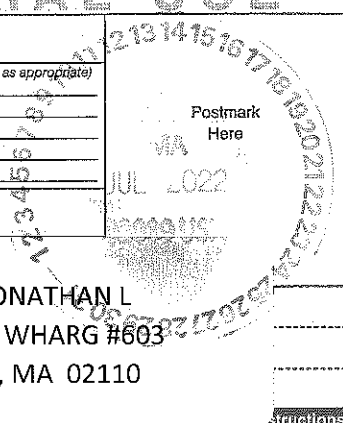
Sent To
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City, State
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BURR JONATHAN L
20 ROWES WHARF #603
BOSTON, MA 02110



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<input type="checkbox"/> Return Receipt (hardcopy)	\$
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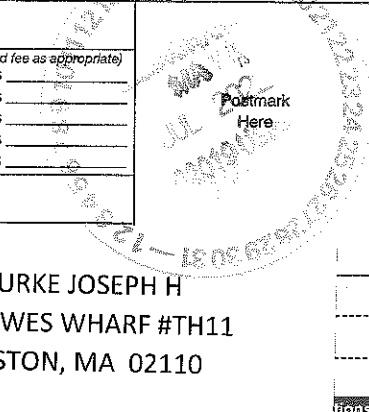
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City, State
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BURKE JOSEPH H
20 ROWES WHARF #TH11
BOSTON, MA 02110



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<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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Postage
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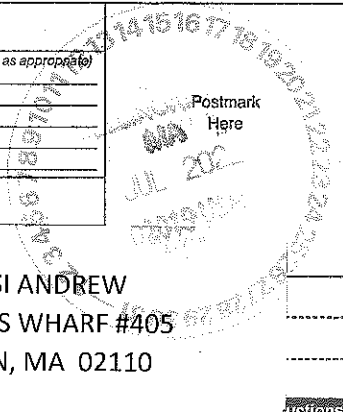
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Street and
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ALOISI ANDREW
20 ROWES WHARF #405
BOSTON, MA 02110



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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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Postage
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Total Postage
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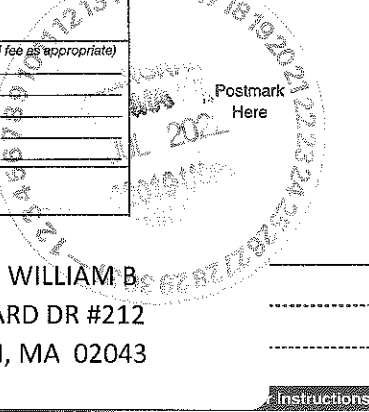
Sent To
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BANNICK WILLIAM B
10 SHIPYARD DR #212
HINGHAM, MA 02043



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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
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Postage
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Total Postage
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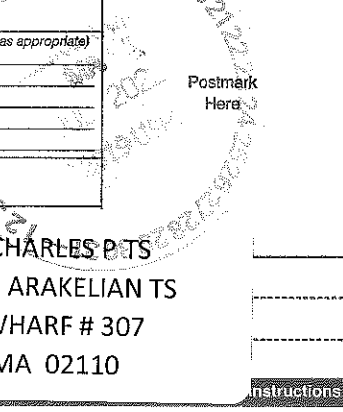
Sent To
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Street and
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City, State
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ARAKELIAN CHARLES P TS
C/O CHARLES P ARAKELIAN TS
20 ROWES WHARF # 307
BOSTON, MA 02110



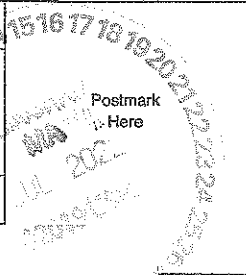
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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



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Total	\$

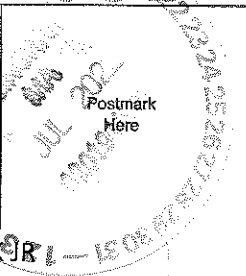
Sent To	REILLY STEPHEN
Street	20 ROWES WHARF #708
City, State	BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total P	\$

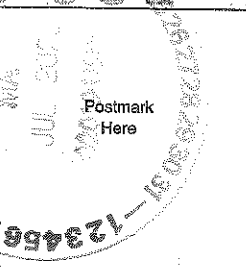
Sent To	REGAN GEORGE K JR C/O REGAN COMMUNICATIONS GROUP
Street	INC
City, State	106 WHARF AVENUE BOSTON, MA 02109

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Po	\$

Sent To	PAO FRANK C C/O ELEANOR & FRANK PAO
Street	301 CHAPEL HILL RD
City, State	PALM BEACH, FL 33480

7021 2720 0001 9671 6818

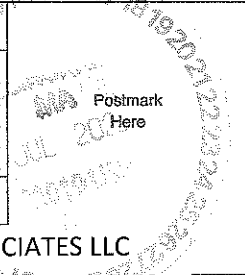
7021 2720 0001 9671 6856

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Por	\$

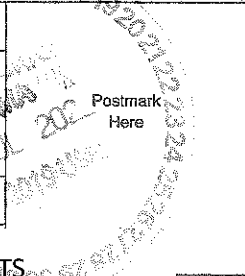
Sent To	ROWES WHARF ASSOCIATES LLC MORGAN STANLEY C/O JENNIE PRIES FRIEND
Street	1585 BROADWAY 37FL MCNT BK DEPT
City, State	NEW YORK, NY 10036

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Pr	\$

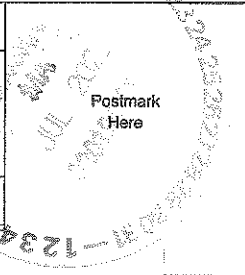
Sent To	ROCHE JOHN J TS C/O JOHN J ROCHE TS
Street	201 BRIDLE TRAIL RD
City, State	NEEDHAM, MA 02492

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total P	\$

Sent To	PIERRO JR RICHARD A 20 ROWES WHARF, UNIT 610
Street	BOSTON, MA 02110

5891 2720 0001 9671 6825

7021 2720 0001 9671 6795

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: PAPPALARDO A NEIL
 Street: 10 ROWES WHARF
 City, State: BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: NOGUEIRA GRACE
 Street: 20 ROWES WHARF 404
 City, State: BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: TRILEV RW LLC
 Street: C/O GOULSTON & STORRS PC
 City, State: 400 ATLANTIC AV BOSTON, MA 02110

7021 2720 0001 9671 6986

7021 2720 0001 9671 6801

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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: MURRAY ROBERT W TS
 Street: 27 CAMBRIDGE ST
 City, State: BURLINGTON, MA 01803

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: MCCARTHY JEFFREY
 Street: 20 ROWES WHARF, UNIT 607
 City, State: BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$

Sent To: BEARS WHARF LLC
 Street: PO BOX 1461 6920 LUPINE TRAIL
 City, State: C/O EDWARD LADD WILSON, WY 83014

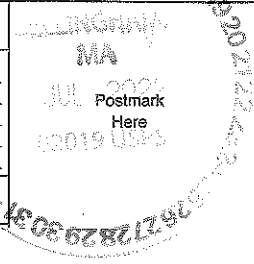
7021 2720 0001 9671 3947

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$



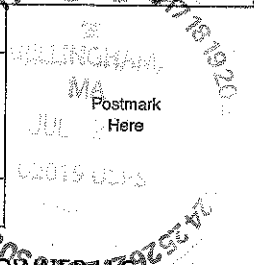
Postage	
\$	
Total Postage	
\$	
Sent To	
REISER ROGER G	
10 ROWES WHARF #PH05	
BOSTON, MA 02110	
PS Form Instructions	

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$



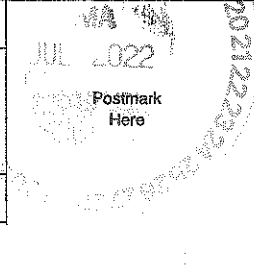
Postage	
\$	
Total Postage	
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Sent To	
FORT HILL SQUARE II OWNER LLC	
C/O PRUDENTIAL INS OF AMERICA	
7 GIRALDA FARMS - 3RD FL	
MADISON, NJ 07940	
PS Form Instructions	

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$



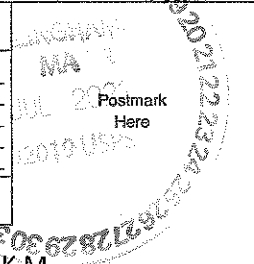
Postage	
\$	
Total Postage	
\$	
Sent To	
BYRNE ARTHUR P	
50 SAGO PALM ROAD	
VERO BEACH, FL 32963	
PS Form Instructions	

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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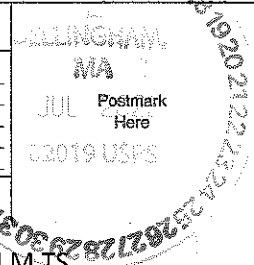
Postage	
\$	
Total Postage	
\$	
Sent To	
FALZONE MARK M	
C/O MARK M FALZONE TS	
10 ROWES WHARF #PH02	
BOSTON, MA 02110	
PS Form Instructions	

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
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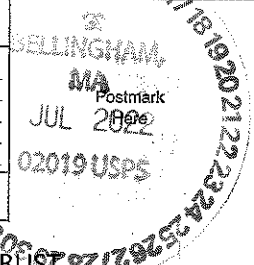
Postage	
\$	
Total Postage	
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Sent To	
SCHULTZ ALLEN M TS	
C/O ALLEN M SCHULTZ	
2600 S OCEAN BL	
PALM BEACH, FL 33480	
PS Form Instructions	

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	
\$	
Total Postage	
\$	
Sent To	
RW 608 REALTY TRUST	
C/O GOULSTON & STORRS PC	
400 ATLANTIC AVE	
BOSTON, MA 02110	
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7021 2720 0001 9671 6894

7021 2720 0001 9671 6382

7021 2720 0001 9671 6924

5279 1201 9671 6375

6499 1201 9671 6498

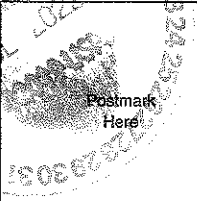
0549 1201 9671 6450

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

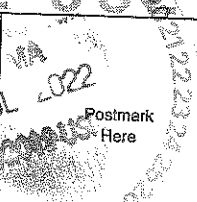
SALEH EL-SAYED M
20 ROWES WHARF #710
BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

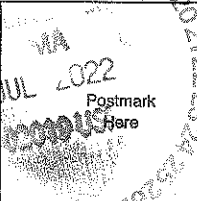
SAPERSTEIN PAUL E
20 ROWES WHARF #TH-04
BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

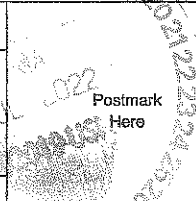
SHUMAN JODY
10 ROWES WHARF #801
BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

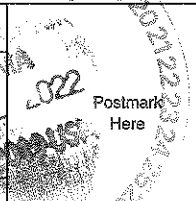
COHEN MICHAEL S
20 ROWES WHARF PH-7
BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

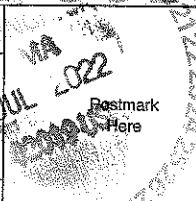
WHARF PROPERTIES LLC MASS LLC
C/O BOWDITCH & DEWEY LLP
101 FEDERAL STREET - SUITE 1405
BOSTON, MA 02110

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$



Postage	\$
Total Post	\$

Sent To
Street and
City, State

FOURTEEN-04 ROWES WHARF TRUST
C/O ROBERT MARR
10 ROWES WHARF UNIT 1404
BOSTON, MA 02110

7021 2720 0001 9671 6481

7021 2720 0001 9671 6467

7021 2720 0001 9671 6462

ETEA 7291 0001 9671 6313

P902 2720 0001 9671 7068

ETEA 7291 0001 9671 6443

7021 2720 0001 9671 7013

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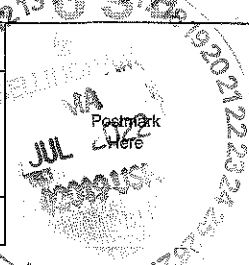
OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage	
\$	
Total Postage	
\$	

Sent To	
Street and	
City, State,	
PS Form 3800, April 2008	

TWENTY R.W.B.M. LLC
ROSS KNIGHTS
P O BOX 1942
BROOKLINE, MA 02446



7021 2720 0001 9671 6955

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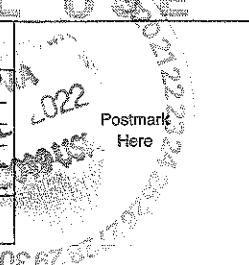
OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage	
\$	
Total Postage	
\$	

Sent To	
Street and	
City, State,	
PS Form 3800, April 2008	

SHANE JAMES H TS
20 ROWES WHARF #305
BOSTON, MA 02110



7021 2720 0001 9671 7044

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Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postage	
\$	
Total Postage	
\$	

Sent To	
Street and	
City, State,	
PS Form 3800, April 2008	

UNIT 705 REALTY TRUST
C/O GOULSTON & STORRS, P.C.
400 ATLANTIC AVENUE
BOSTON, MA 02110

