

Dear Researcher:

Thank you for your interest in the Max R. Traurig Library at the Mattatuck Museum. The 1400+ volume library includes an extensive Waterbury history archive as well as local-subject files, Connecticut artist files, some maps, and some city directories. Kindly refer to the collection's finding aid to the library's archives.

The Mattatuck Museum is a self-supporting, private, non-profit, educational institution committed to the preservation of Waterbury's heritage. The Library is open by appointment made by calling the curatorial office at 203-753-0381 extension 12 or extension 15.

We also are able to conduct research from a written request, but due to the large number of reference requests received by our Museum, it has become necessary for us to charge a reference fee. The reference fee is \$25.00 per hour with the first hour prepaid. Any photocopies we make from the search cost \$.25 apiece, with a limit of 50 copies per collection. While we make every effort to respond quickly to research requests, results may not be available for ten to twelve weeks.

Please fill in the research application form. Provide a complete description of your research area, specific questions, and identify the sources already consulted.

Kindly complete, sign and return the research-fee letter along with your payment for the first hour of research. You will be billed for any additional hours. Send these materials to Mattatuck Museum Library, 144 West Main Street Waterbury, CT 06702.

We wish you well with your research and look forward to hearing from you.

Cynthia Roznoy, Ph.D.
Curator

Suzie Fateh
Collections Manager

MATTATUCK MUSEUM ARTS & HISTORY CENTER

144 West Main Street, Waterbury, Connecticut 06702 203-753-0381

www.mattatuckmuseum.org

RESEARCH APPLICATION

Date _____

Name _____

Address _____

Phone _____ E-mail _____

Affiliation _____

Nature of Research _____

Specific questions _____

Resources consulted _____

This application serves as an invoice for 1 hour of research at \$25 per hour. Work will begin upon payment.

_____ Check is enclosed (payable to Mattatuck Museum)

_____ Please bill my (circle one): MasterCard VISA AMEX

Cardholder's Name _____

Account Number _____ Expires _____

Signature of Cardholder _____