



For Use by Permitting Coordinator:

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

Determination of Completeness: \_\_\_\_\_

Additional Information Received: \_\_\_\_\_

Application Withdrawn: \_\_\_\_\_

**RECEIVED**

SEP 16 2021

DESIGN REVIEW  
COMMITTEE

**TOWN OF STURBRIDGE  
APPLICATION FOR PERMANENT SIGN  
REVISED 1/6/21**

Site: 559 Main St. Fiskdale  
Location (Street Number and Street Name)

**Section 1. Applicant/Owner/Agent Information:**

**A. Applicant:**

Business Name: Deep Roots Distillery USA, LLC

Applicant Name: Erica DelVarenne

Address: 89 Breakneck Rd  
Sturbridge MA 01566

Phone: 508 347 3525 Fax: \_\_\_\_\_

Email: deeprootsdistilleryusa@gmail.com

**B. Property Owner:**

Name: Sturbridge Market Realty LLC (Eric Rubin)

Address: PO Box 619  
Fiskdale MA 01518

Phone: 508 400 0073 Fax: \_\_\_\_\_

Email: bostonmgt@gmail.com

**C. Agent Information:**

Business Name: \_\_\_\_\_

Agent: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Section 2. Basic Site and Project Information:**

A. Assessor's Parcel Identification Numbers: \_\_\_\_\_

\_\_\_\_\_

**B. Proposed Sign Information:**

Please provide a general description of the sign and location of the sign (attach additional sheets if necessary):

36x36 metal frame sign with Sintra Base and exterior vinyl logo. Sign will have down ~~the~~ lighting on each side (sign is double sided) See photos for more info.

C. Note any current zoning or general bylaw non conformance associated with the property or the application:

none known

\_\_\_\_\_

\_\_\_\_\_

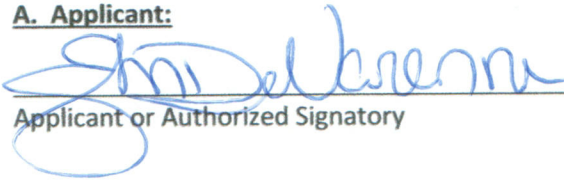
\_\_\_\_\_

\_\_\_\_\_

- Planting plan, with descriptions of materials. Planting plan identifying the proposed plant material and quantity of each by location on plan; an overall plant list, which at a minimum identifies total quantities of each plant used; botanical and common name for each plant, and size of the plant material at time of installation.
- Photographs of existing signage on the site and the building will aid the DRC in making its decision and are required as a submittal.

**Section 4. Required Signatures:**

**A. Applicant:**

  
 Applicant or Authorized Signatory

8-26-2021  
 Date

**B. Property Owner:** I hereby grant permission for the applicant to apply for and erect the signs as proposed on the above referenced property.

  
 Owner or Authorized Signatory

08-26-2021  
 Date

**C. Agent:** If someone is representing the applicant or the owner, the applicant must designate such representative below:

Name of Representative:

\_\_\_\_\_

Address of Representative:

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship of representative to owner or applicant: \_\_\_\_\_