



For Use by Permitting Coordinator:

Date Received: _____

Determination of Completeness: _____

Additional Information Received: _____

Application Withdrawn: _____

**TOWN OF STURBRIDGE
APPLICATION FOR PERMANENT SIGN**

REVISED 2/07/11

Site: 100 Charlton Road
Location (Street Number and Street Name)

Section 1. Applicant/Owner/Agent Information:

A. Applicant:

Business Name: Baystate Dental of Sturbridge

Applicant Name: _____

Address: 100 Charlton Road
Sturbridge, Ma 01526

Phone: 413-847-1327 Fax: 941-907-2099

Email: nlipp@dentalcarealliance.com

B. Property Owner:

Name: Vereit

Address: 2325 East Camelback Road Suite 1100
Phoenix, AZ 85016

Phone: 407-378-2489 Fax: _____

Email: ddeleon@vereit.com

C. Agent Information:

Business Name: Serrato Signs LLC
Agent: Andrew Serrato
Address: 15 Deway Street
Worcester, Ma 01609
Phone: 508-756-7004 Fax: 508-756-7050
Email: AndyS@SerratoSigns.com, Linda@SerratoSigns.com

Section 2. Basic Site and Project Information:

A. Assessor's Parcel Identification Numbers: 208-02234-100

B. Proposed Sign Information:

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

(1) 46" High x 11'-7/8" Long - Stud-mounted Flush to Fascia

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

D. Note any special permit or variances granted or denied or in process at this time:

Section 3. Required Application Submittals: The applicant shall submit one original set and six copies of the application and final drawings and one set of materials at the time the application is submitted to the Town Planner. The following information must be submitted with the application for a sign permit for new signs and changes to existing signs: (At its discretion, the DRC may substitute some requirements with a site visit).

- A Site Plan showing property lines, setback areas, access points, traffic flow and a scaled site plan showing property lines, appropriate front, side, and rear yard setbacks as identified in the Zoning bylaw, pedestrian and vehicular access and existing buildings and significant site objects and features, and the existing and proposed sign locations shall also be shown.
- A drawing of the proposed structure or sign, including color and type of surface materials, showing front elevations, rear elevations, and side elevations, where there are not adjoining buildings. The drawing should accurately convey the design of the sign including lettering styles, size, and composition. The location, font, and contrasting color of the street number shall be easily read by emergency personnel and patrons/visitors.
- A description of the materials, colors, and lighting, (if the sign is to be lit), to be used in the modification of an existing sign or construction of a new sign. The presentation of photographs showing the existing signs to be modified would be helpful. Samples of the colors of the proposed sign and materials to be used for the construction of the signs and supports shall also be submitted.
- Scale drawings of the proposed sign, (whether the modifications of an existing sign, or the provision of a new sign) shall be submitted, including a plan view and an architectural elevation of each side. One architectural elevation will suffice if all sides are identical. All drawings shall include dimensions indicating the length, width, and height of the proposed signage as appropriate to the information conveyed by plan or elevation. Applicants shall review the Town of Sturbridge Zoning Bylaw for detailed information on zoning limitations and requirements relative to their signage situation prior to designing any new proposed signs. The Bylaw may be accessed on line at the following link:
http://www.town.sturbridge.ma.us/Public_Documents/SturbridgeMA_PlanningDocuments/Zoning%20Bylaw%202010?FCItemID=S02B54AC5

- 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:

See Attached Authorization
 Applicant or Authorized Signatory

 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.

See Attached Authorization
 Owner or Authorized Signatory

 Date

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

Name of Representative: Andrau Serrato / Serrato Signs LLC

Address of Representative: 15 Dewey Street
Worcester, Ma 01609

Phone: 508-756-7004 Fax: 508-756-7050

Email: Andys@serratosigns.com, Linda@serratosigns.com

Relationship of representative to owner or applicant: Sign Installer

Finance Director/Tax Collector: I certify that the taxes are current for the above property (applicant must obtain this signature prior to submission of this application)

Authorized Signatory

Date

Design Review Committee Decision

A. APPLICANT

Name _____

Address _____

Telephone No. _____

B. SIGN DIMENSIONS AND LAYOUT

Overall _____ Area _____
Dimensions

Colors _____

Lettering _____

Materials _____

Other _____

C. CONFORMANCE WITH DESIGN STANDARDS

YES NO

Signs with associated architectural details, materials, colors and textures are compatible with the predominant architectural character of the neighborhood, while preserving and enhancing the surrounding area.

Advertising features, including size, location, design, color, texture, lighting and materials, shall not detract from the use and enjoyment of the proposed building and structures and the surrounding properties.

Preservation of historic, traditional or significant uses, structures or architectural elements have been preserved to the greatest extent possible.

D. Summary of Recommendations:

The Design Review Committee has reviewed the above referenced sign application at its meeting held on _____ and the sign(s) as proposed have been:

Approved as proposed

Approved with the following comments or modifications: _____

Denied due to the following: _____

Additional Comments of the Design Review Committee: _____

Authorized Signatory

Date

Zoning Enforcement Officer/Building Inspector Decision:

Approved as proposed

Approved with the following comments or modifications: _____

Denied due to the following: _____

Authorized Signatory

Date

Attach Additional Sheets as Necessary



April 10, 2018

**RE: Sign Approval
Baystate Dental of Sturbridge
Center at Hobbs Brook
100 Charlton Road, Sturbridge, MA 01566**

To whom it may concern;

We are in receipt of the proposed sign design for your new signage at the Shopping Center and approve the sign as attached subject to the following conditions:

1. Manufacturing and installation shall be completed in a good workmanlike manner and in compliance with all applicable covenants, restrictions, statutes, regulations and ordinances.
2. Appropriate governmental permits, Owner's Association and Business Park approvals as necessary must be obtained by Tenant and provided to Landlord prior to installation.
3. All signage must be manufactured and installed by a Massachusetts State licensed contractor. Installer must have liability insurance and worker's compensation insurance in an amount appropriate for the scope of work.
4. The sign materials and installation methods must conform to the Sign Criteria as defined in the Lease.
5. Contractor is not permitted to make any roof penetrations to the building, remove flashing or jeopardize the roof warranty in any manner. Landlord will not be held responsible for any leaks occurring from said installation.
6. Said approval is based on measurement as provided by sign contractor and has not been field verified. If measurements are inaccurate causing a sign violation notice the Tenant and/or contractor shall be responsible to rectify.
7. Said approval for logoed awnings is contingent upon agreement by Tenant that awnings will be replaced with Center – standard awnings, upon termination of lease.

The Tenant shall be responsible to contract for said work and installation is contingent upon Tenant's authorization and approval. Should signage not be installed as approved, Tenant will be required to remove and replace at its own expense.

If you have any questions or need further clarification, please do not hesitate to contact me at 407.378.2489 or via email at ddeleon@vereit.com.

Sincerely,

**Denice DeLeon
Property Manager, As Agent for Owner
VEREIT MT Sturbridge MA,LLC**

VEREIT

Letter of Authorization

This letter authorizes Serrato Signs to secure permits to perform sign installation, removals or any sign maintenance necessary at our property located at:

100 Charlton Rd. #25 Sturbridge, MA 01566

Dental Care Alliance, LLC

By:  5/1/18

Craig Marten – Project Manager

State of Florida County of Manatee

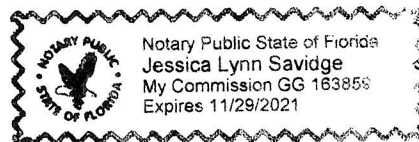
The foregoing instrument was acknowledged before me this 1st day of May 20 18

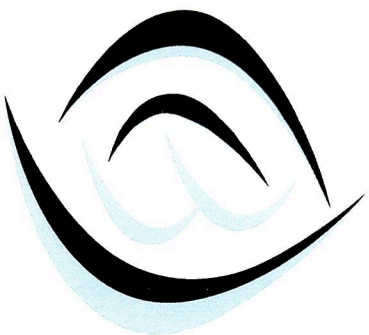
By Craig Marten

Who is personally known to me or has produced n/a as identification.

99163859 Commission number.







Baystate Dental

**100 CHARLTON RD., STE. 25
STURBRIDGE, MA 01566**

A

ONE (1) SET OF 8 3/8" FCO LETTERS & LOGO
READING "BAYSTATE DENTAL"
REFER TO PG 3 FOR PROPOSED SIGNAGE.
REFER TO PG 4 FOR SIGNAGE DETAIL.





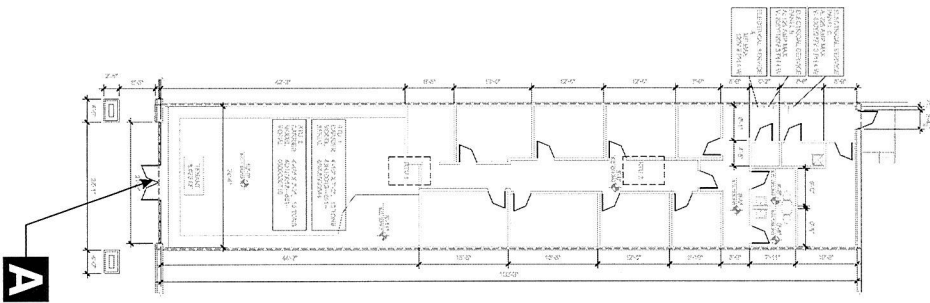
SALES: LISA KOEBEL
FM: TONY NEMETH
ART: GED 3.21.18

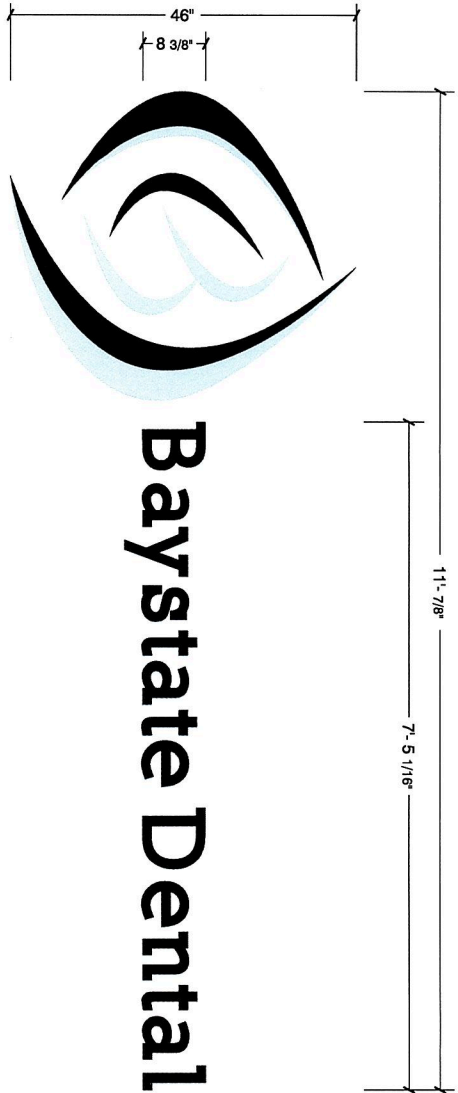
DWG # 1803050-01
REVISION

LOCATION:
100 CHARLTON RD., STE. 25
STURBRIDGE, MA 01566

2 OF 4

FLOOR PLAN
NTS



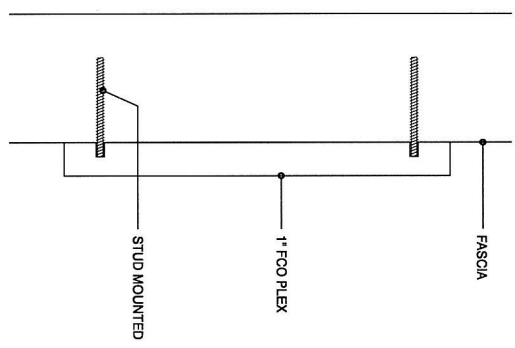


A

FCO PLEX LETTERS
 SCALE: 3/4" = 1'-0"
 SQ. FT.: 21.36

QTY: 1

1" THICK FCO PLEX LETTERS,
 PAINT PMS 2975C & BLACK,
 STUD-MOUNTED FLUSH TO FASCIA.



CROSS SECTION
 NTS

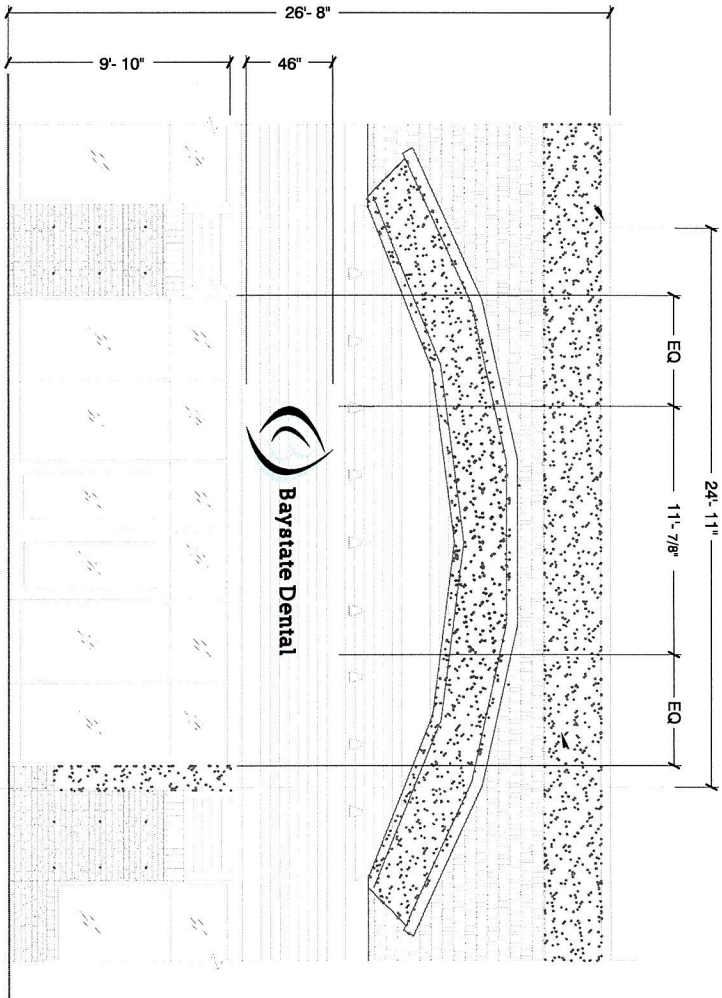
| | | | | | |
|---|--------|-------------|----------|------------|--|
|  | SALES: | LISA KOEBEL | DWG # | 1803050-01 | LOCATION: 100 CHARLTON RD., STE. 25 STURBRIDGE, MA 01586 |
| | PM: | TONY NEMETH | REVISION | AWZ 4.5.18 | |
| | AKT: | GED 3.21.18 | | | |

SALES: LISA KOEBEL
 PM: TONY NEMETH
 ART: GED 3.21.18

DWG # 1803050-01
 REVISION AMZ 4.5.18

LOCATION:

100 CHARLTON RD., STE. 25
 STURBRIDGE, MA 01566



A PROPOSED STOREFRONT
 SCALE: 3/16" = 1'-0"

SIGN TO BE CENTERED HORIZONTALLY W/ DOORS & VERTICALLY BETWEEN TOP MULLION & BOTTOM OF LIGHT FIXTURE HOODS.