

For Use b	y Permitting Coordinator:
Date Re	ceived:
Determination of Comple	eteness:
Additional Information Re	eceived:
Application Wit	ndrawn:

TOWN OF STURBRIDGE APPLICATION FOR PERMANENT SIGN

REVISED 3/23/11

Site: 371 MAIN STREET Location (Street Number and Street Name	e)
Section 1. Applicant/Owner/Agent Information:	
A. Applicant: Business Name: Handrown den Decor DBA Agdrone Applicant Name: Shoran Power Address: 317 Main Street Shoran day MA 01546 Phone: My-230-3415 Fax: Email: Skawer Ochontec nut	
B. Property Owner: Name: OSV	
Name: OSV. Address: 1 ON Strabnidge Village Road	
Phone: 508.347-0252_Fax:	
Email: Tkrasnedy 8 OSV, Org	
·	RECEIVED
	AUG 14 anan

AUG 14 2020

DESIGN REVIEW COMMITTEE

C. Agent Information:
Business Name: Brim Field Sign & Co.
Agent: Tosean Faucker
Address: 292 Warren Road
Brimfield, MA
Phone: 617-820-3630 Fax:
Email:
Castan 2. Paris Cita and Duaiset Information:
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):
230 Equare Poot Exterior Post Mounted
to existing Posts
C. Note any current zoning or general bylaw non conformance associated with the property or the
application:

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	Date 8 141 20			
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	Date			
C. Agent: If someone is representing the applicant or the owner, the applicant below: Name of Representative: To seph Fauchev Bringfield				
Address of Representative: 292 Warren Road Brimfield, MA				
Phone: 617-870-3630 Fax: Email: 10-faucher @ Charter. Ket				
Relationship of representative to owner or applicant: Contractor				
Relationship of representative to owner or appropriate Conference				

Finance Director/Tax Collector: I certify that the taxes are current	t for the above property (applicant must
obtain this signature prior to submission of this application)	\circ
So In	8-14-20
Authorized Signatory	Date

Design Review Committee Decision

A.	Al	PPLICAN		
	Name	9		
	Addro	ess		
	Tele	ohone No		
В.	9	IGN DIN	ENSIONS AND LAYOUT	
	Ove Dim	rall ensions	Area	
	Colo	ors		-
	Lett	ering		-
	Ma	terials		
	Oth	neř		-
	C. YES	CONFO	MANCE WITH DESIGN STANDARDS	
		0	igns with associated architectural details, materials, colors and textures are compatible he predominant architectural character of the neighborhood, while preserving and enhancing the surrounding area.	e with
		Ċ	Advertising features, including size, location, design, color, texture, lighting and materi not detract from the use and enjoyment of the proposed building and structures and the surrounding properties.	als, shall ne
			Preservation of historic, traditional or significant uses, structures or architectural elem have been preserved to the greatest extent possible.	ents
		NIDÍV D 3	SIGN REVIEW Page	e 6 of 7

APPENDIX B-2

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	

Attach Additional Sheets as Necessary