

Suffield Historic District Commission

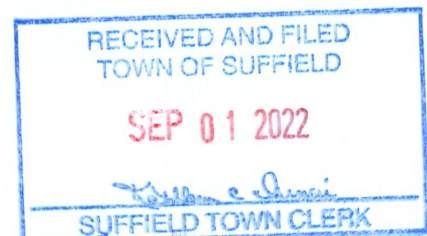
Agenda – Regular Meeting

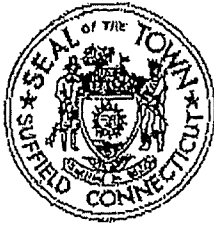
September 12, 2022, 7:30 P.M.

Town Hall Meeting Room

83 Mountain Rd.

1. Call to Order/Roll Call
2. Designation of Voting Members
3. Approval of Minutes
4. Public Comments
5. Applications for a Certificate of Appropriateness
 - a. 1 Mountain Rd., Proposed Exterior sign
 - b. 149 S. Main St., Proposed Adaptive Re-use.
6. Adjournment





Application For Certificate of Appropriateness

The Suffield Historic District Commission
Suffield, CT 06078

Date 8-26-2022

Application is hereby made for issuance of a Certificate of Appropriateness under "An Ordinance Creating a Historic District, et al." Adopted May 27, 1963, and authorized pursuant to Public Act #430 of the Connecticut General Statutes as Amended by Public Act #600 of the 1963 Connecticut General Statutes.

Details of the work are provided below:

Owner's Name DON LEDOUX, DC & LISA PEPE
Address of Proposed Work 1 MOUNTAIN RD SUFFIELD CT 06078
Owner's Address 1 MOUNTAIN RD SUITE 203 SUFFIELD CT 06078
Agent or Contractor SIGN FACTORY
Address 25 DUSTHOUSE ROAD ENFIELD CT 06082
Proposed work is in connection with: ☐ Private Dwelling ☐ Accessory Building ☐ Commercial Building
☒ Sign ☐ Other (specify) _____

Describe the nature of the proposed work. Please be as specific as possible, including all pertinent design elements, site plans, scale drawings and/or photographs.

PLEASE SEE ATTACHED

D. R. Ledoux, D.C.
Signature of Applicant

Does the proposed work meet zoning requirements? ☐ Yes ☐ No

Date

Signature of Zoning Officer

For Historic District Commission Use Only

(Not to be filled in by applicant)

Application No. # _____ Date Received _____
Payment Received _____ Form of Payment (specify) _____
Notice of Public Hearing Published _____ Date of Hearing _____
Action Taken: Approved as Submitted ☐ Approved as Modified ☐ Application Rejected ☐
REASON FOR ACTION: _____

Date

Historic District Commission



ONE SIDED BUILDING SIGN



OVER HOOD POST SIGN ONLY

- (2) ONE (1) SIDED PVC SIGN WHITE
- ALUMINUM ANGLE WALL & HANGING BRACKETS
- BUILT UP PICTURE FRAME EDGE
- COVE PAINTED EDGE
- CARVED PAINTED NAME AND PRACTICE
- 3D DOT /RAY LOGO
- CUSTOMER SUPPLIES PMS HISTORIC COLOR CODES
- CUSTOMER SUPPLIES HANGING BRACKET STRONG ENOUGH TO SUPPORTS THE SIGN WITH HOOK HOLES
- SIGN INSTALLATION
- CUSTOMER IS RESPONSIBLE FOR ALL DESIGN APPROVALS, PERMITS, STAMPS & INSPEC MEETINGS AND MISC. PAPERWORK & ASSOCIATED COSTS, IF NEEDED

SIGNFACTORY

HAZARDVILLE, CT • 860-763-1085

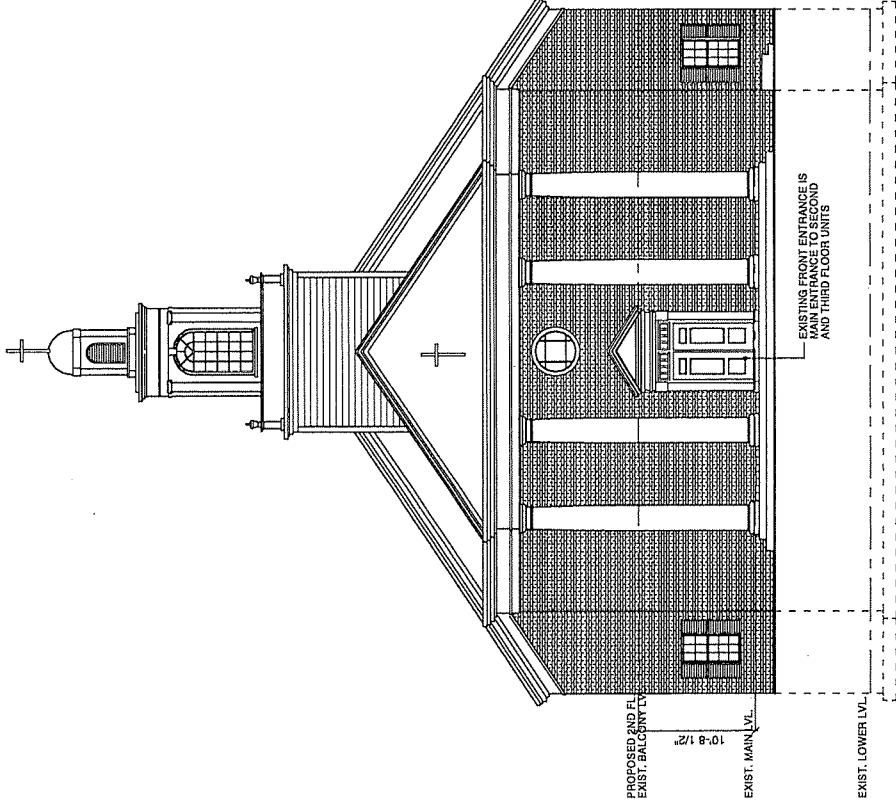
SIGNATURE

8/6/2022

DATE

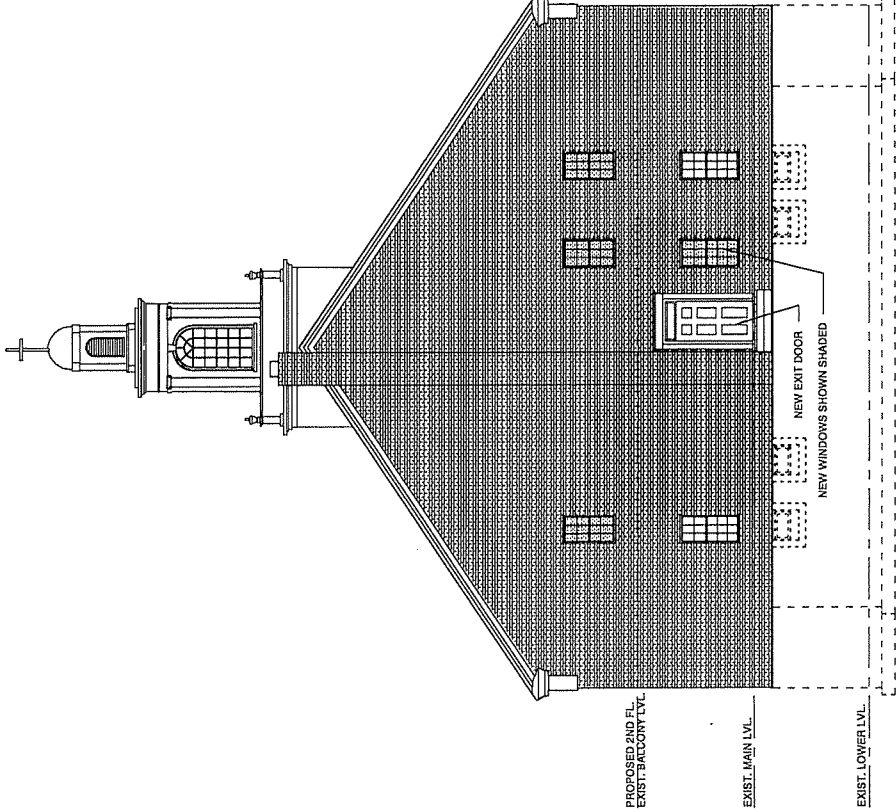
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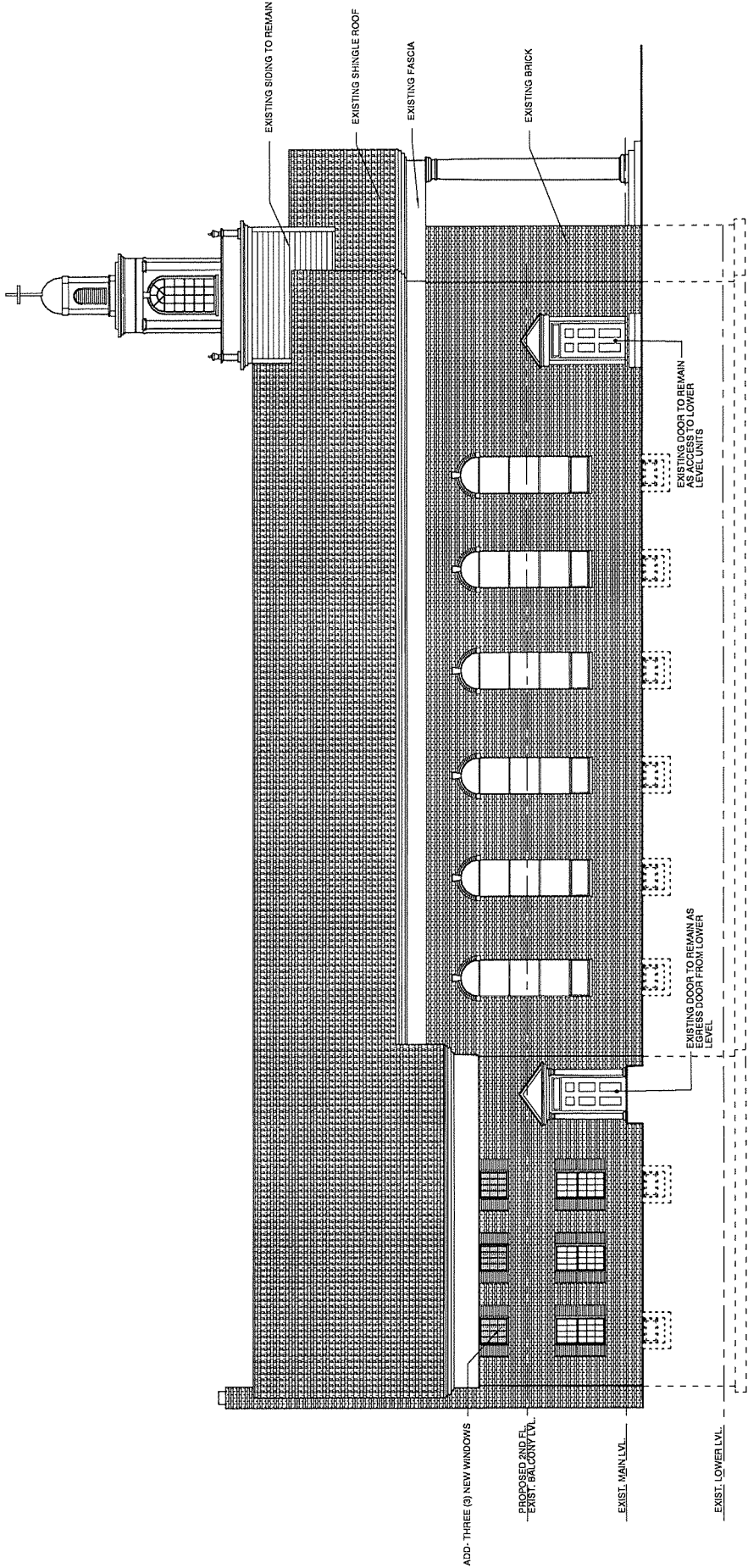
FRONT ELEVATION

SCALE: 1/8" = 1'-0"



REAR ELEVATION

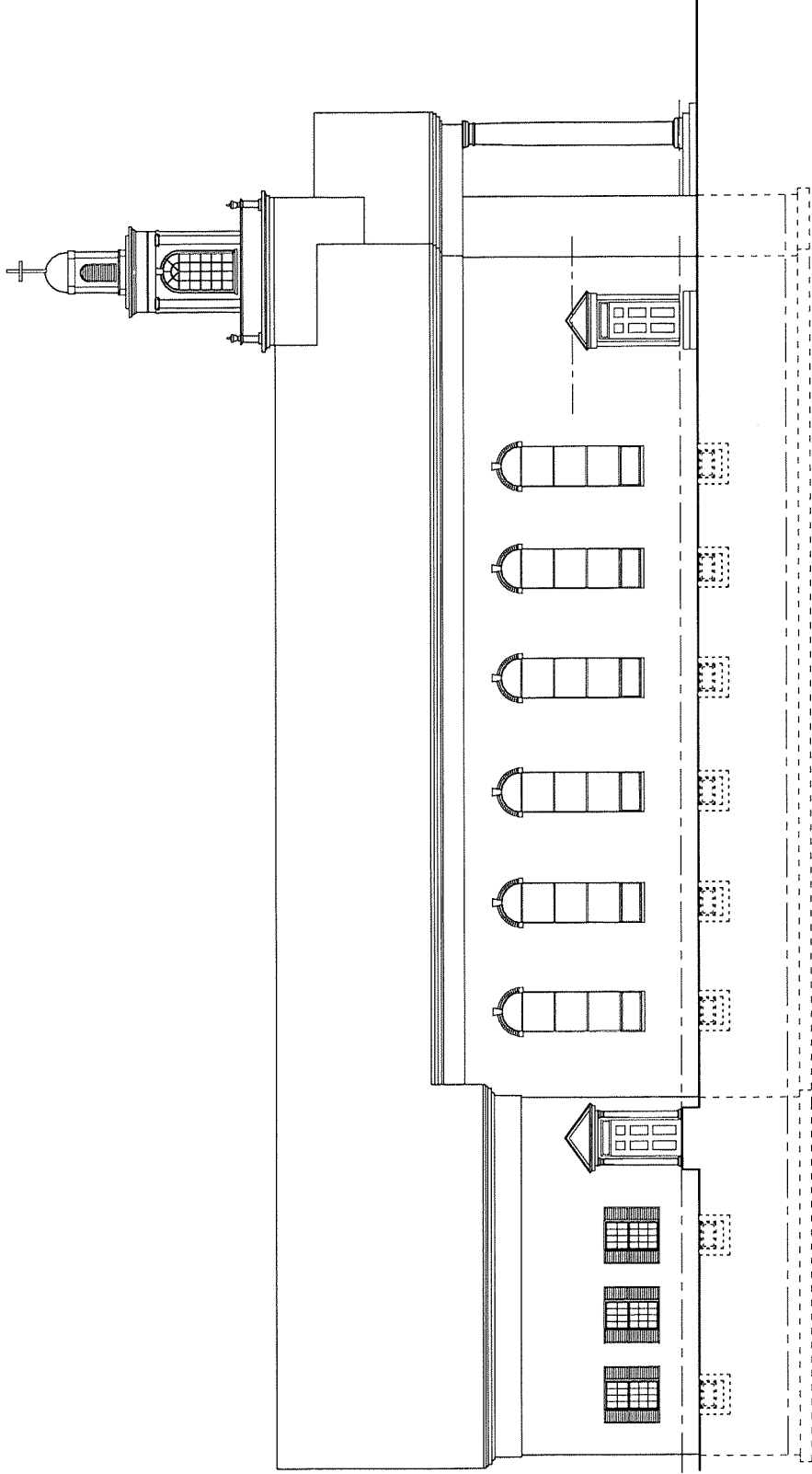
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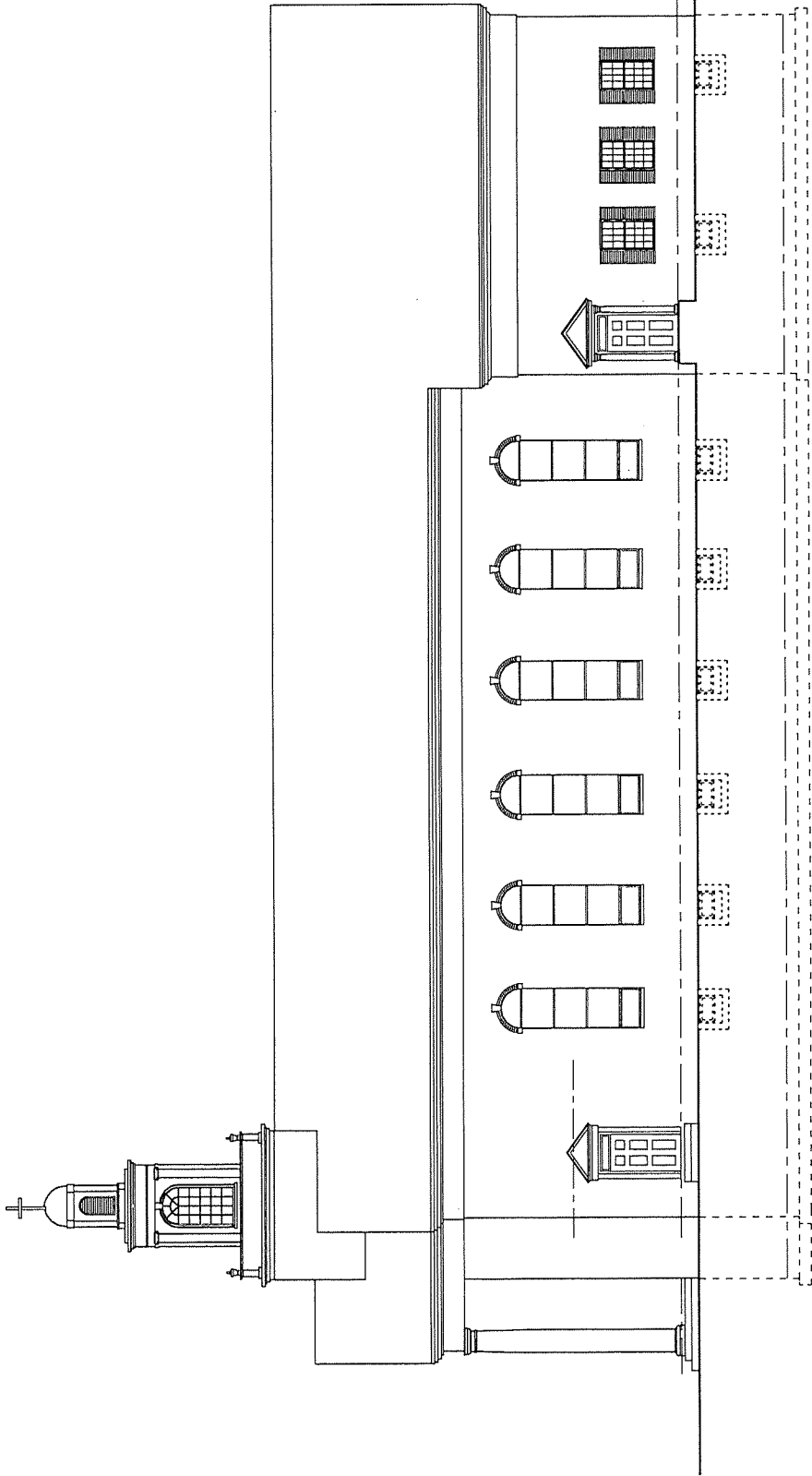
LEFT SIDE ELEVATION

SCALE: 1/8" = 1'-0"

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					ISSUE/ REVISIONS		
					SCALE	AS NOTED	
					DRAWN	JC	
					CHECKED		



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					SCALE						
					DRAWN						
					CHECKED						



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							SCALE		
							DRAWN		
							CHECKED		



Application For
Certificate of Appropriateness

The Suffield Historic District Commission
Suffield, CT 06078

Date 8/31/22

Application is hereby made for issuance of a Certificate of Appropriateness under "An Ordinance Creating a Historic District, et al." Adopted May 27, 1963, and authorized pursuant to Public Act #430 of the Connecticut General Statutes as Amended by Public Act #600 of the 1963 Connecticut General Statutes.

Details of the work are provided below:

Owner's Name SACRED HEART ROMAN CATHOLIC CORPORATION
Address of Proposed Work 140 SOUTH MAIN STREET
Owner's Address P.O. BOX 626, SUFFIELD, CT 06078
Agent or Contractor JAMES R. McMAHON, III
Address 315 BOSTON STREET, GUILFORD, CT 06437
Proposed work is in
connection with: ☐ Private Dwelling ☐ Accessory Building ☐ Commercial Building
☐ Sign ☐ Other (specify) CHURCH

Describe the nature of the proposed work. Please be as specific as possible, including all pertinent design elements, site plans, scale drawings and/or photographs.

1. Front elevation - no changes.
2. Rear elevation - Add four windows and door, per print.
3. Left side elevation - Add three second floor windows, per print.
4. Right side elevation - Add three second floor windows and remove door to left of first floor windows, per print.
5. Remove oil tank, rear building.
6. Remove ductwork, rear building.

Signature of Applicant

Does the proposed work meet zoning requirements? ☒ Yes ☐ No

Date

Signature of Zoning Officer

For Historic District Commission Use Only

(Not to be filled in by applicant)

Application No. # _____ Date Received _____
Payment Received _____ Form of Payment (specify) _____
Notice of Public Hearing Published _____ Date of Hearing _____
Action Taken: Approved as Submitted ☐ Approved as Modified ☐ Application Rejected ☐
REASON FOR ACTION: _____

Date

Historic District Commission