



PLANNING DEPARTMENT

Town of Durham

15 Newmarket Road

Durham, NH 03824-2898

Phone (603) 868-8064 Fax (603) 868-8033

www.ci.durham.nh.us

HISTORIC DISTRICT COMMISSION

Application for Certificate of Approval

Town of Durham, New Hampshire

Date: 3-19-15

Property information

Property address/location: 50 Newmarket Road Durham, NH 03801

Tax map and lot #: 9-8; Date of building, if known: 1686

Name of project (if applicable): Subdivision Land of Seacoast Repertory Theatre

Property owner

Name (include name of individual): Seacoast Repertory Theatre, Helen Goransson

Mailing address: 125 Bow Street Portsmouth, NH 03801

Telephone #: (603) 433-4793 Email address: heleng@bondgarden.net

Applicant (if different from property owner)

Name (include name of individual): Helen Goransson

Mailing address: 255 Depot Road Eliot, ME 03903-1276

Telephone #: (207) 439-1276 Email address: heleng@bondgarden.net

Architect/Designer (if applicable)

Name (include name of individual): MJS Engineering

Professional Designation: Engineer

Mailing address: 5 Railroad Street Newmarket, NH 03857

Telephone #: (603) 659-4979 Email address: mjseng95@gmail.com

Contractor (if applicable)

Name (include name of individual): _____

Mailing address: _____

Telephone #: _____ Email address: _____

(over)

Proposed activity (check all that apply)

New building/structure: ____ Addition onto existing building/structure: ____

Alterations to existing building: ____ Demolition: ____ Signage: ____

Site development (other structures, parking, utilities, etc.): X Change of use: ____

Describe project? Upgrades to existing driveway including adding 4' gravel shoulders along the existing pavement and flattening the slope of the driveway as it meets Route 108.

Proposed starting date: Work will start when the proposed subdivision lot is purchased.

Submission of application

This application must be signed by the property owner, the applicant/developer (if different from property owner), and/or the agent.

I hereby submit this application to the Town of Durham Historic District Commission pursuant to the Town of Durham Historic District Ordinance and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As applicant/developer (if different from property owner) or as agent, I attest that I am duly authorized to act in this capacity and submit this application.

Name: Matt Fagginger-Auer

Signature: Matt Fagginger-Auer Date: 3-19-15

Circle all that apply: *property owner* - *developer* - *architect/designer* - *contractor* - **agent**

** Please note that the applicant or a representative must attend the HDC meeting to present the application and answer any questions. If nobody attends the meeting then the HDC may not take any action on the application.*