



PLANNING DEPARTMENT

Town of Durham

8 Newmarket Road
Durham, NH 03824-2898
Phone (603) 868-8064
www.ci.durham.nh.us

HISTORIC DISTRICT COMMISSION
Application for Certificate of Approval
Town of Durham, New Hampshire

Date: January 20, 2017

Property information

Property address/location: 23-35 Main Street

Tax map and lot #: _____; Date of building, if known: _____

Name of project (if applicable): Orion Student Housing

Property owner

Name (include name of individual): Orion Edge LLC

Mailing address: 23 Main Street, Durham NH 03824

Telephone #: 603.868.5400 Email address: jralston@willscompanies.com

Applicant (if different from property owner)

Name (include name of individual): _____

Mailing address: _____

Telephone #: _____ Email address: _____

Architect/Designer (if applicable)

Name (include name of individual): Sundance Signs Co. / Mike Leary

Professional Designation: Signage

Mailing address: 89 Oak Street, Dover NH 03820

Telephone #: 603.742.1517 Email address: design@sundancesign.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: X

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

Describe project: We would like to have three (3) parking signs installed in the front of 29 Main Street stating that it is 15 Minute Parallel Parking only. Sundance Signs has already designed the signs. Proofs attached.

Proposed starting date: February 2, 2016

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: _____

Signature: _____ Date: _____

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.*