#### DESIGN REVIEW COMMISSION AGENDA

#### Tuesday, October 22, 2019 7:00 PM Municipal Building, 355 East Central Street 2<sup>nd</sup> Floor, Room 205

**7:00 PM** Coldwell Banker Residential Brokerage – 250 Franklin Village Drive Led lighted channel letters

7:05 PM WW Studio – 289 East Central Street Replace existing Weight Watcher signage with new Name/Logo

## TOWN OF FRANKLIN 2019 OCT IT A 9:07 RECEIVED

#### **General Matters**

Approval of Minutes: 10/08/2019

COMMENTS: These listing of matters are those reasonably anticipated by the Chair which may be discussed at the meeting. Not all items listed may in fact be discussed and other items not listed may also be brought up for discussion to the extent permitted by law.

This agenda is subject to change. Last updated: October 17, 2019 The next meeting of the Design Review Commission is scheduled for November 5, 2019

#### FORM Q

#### TOWN OF FRANKLIN DESIGN REVIEW APPLICATION FOR §185-31(2) OF THE ZONING BY-LAW

#### A) General Information

Name of Business or Project: Coldwell Banker Residential Brokenge
Property Address 250 Franklin Village Drive
Assessors' Map # Parcel #00_0/4 - 000 - 000
Zoning District (select applicable zone): <u>Business</u>
Zoning History: Use Variance Non-Conforming Use
B) Applicant Information:
Applicant Name: Classic Signs Inc.
Address: 13 Columbia Drive Amherst N. 14. 03031
Telephone Number: 603 - 883 - 0384
Contact Person: PAUL TRipp
C) Owner Information (Business Owner & Property Owner if different)
Business Owner: <u>lo Idwell Broker Residentia</u> Property Owner: <u>C3C FRANKLIN VI VIASE LP</u> Address: <u></u>
All of the information is submitted according to the best of my knowledge Executed as a sealed instrument this day of 20
Signature of Applicant Signature of Owner

PAUL S. TRIPP

Print name of Applicant

Christine Smith Print name of Owner

#### \*<u>FOR SIGNS COMPLETE PAGES 1 & 2 ONLY</u>. <u>FOR SITE PLANS, BUILDING PLANS, PROJECTS, COMPLETE PAGES 1 – 4</u>

SEE ADDENDA ATTACHED FOR ASSISTANCE IN COMPLETION OF FORM Q

#### D) Architect/Engineer/Sign Company Information (if not the applicant)

a. Sign Company	
Business Name:	Classic Signs Inc.
Contact Person:	PAUL TRIPP
Address	13 Colourbia Drive Ambasst Nell. 03031
Telephone Number:	603 - 883 - 0384

#### b. Architect/Engineer (when applicable)

Business Name:	
Contact Person:	
Address	
Telephone Number:	

#### E) Work Summary

Summary of work to be done:	LED	lighted	channel	letters	
		/			

#### F) Information & Materials to be Submitted with Application

#### a) FOR SIGN SUBMISSIONS ONLY:

### NINE (9) COPIES OF THE FOLLOWING MUST BE SUBMITTED WITH APPLICATION

 1. Drawing of Proposed Sign which must also include type of sign (wall, pylon etc.) size/dimensions style of lettering
 colors materials lighting-illuminated, non-illuminated and style

2. Drawing and/or pictures indicating location of new sign.

3. Picture of existing location and signs (if previously existing location)

#### b) FOR BUILDINGS/DEVELOPMENTS OR PROJECT SUBMISSIONS:

#### NINE (9) COPIES OF THE FOLLOWING MUST BE SUBMITTED W/APPLICATION

- 1. Site Plan including Landscape Plan showing plantings. Plantings must be from Best Development Practices Guide
- 2. Lighting Plan indicating lighting levels & specifications of proposed lights
- **3**. Building drawings, indicating size and height of building(s); front, rear and side elevations (when there are no adjoining buildings) and floor plans
- 4. Drawings or pictures of existing conditions
- 5. If any signage on the building or site, provide information from above Signage Checklist

Note: Please bring a sample of the following to the meeting: materials samples (brick, siding, roofing etc.) as well as samples of paint colors.

The Commonwealth of Massachusetts       Print Form         Department of Industrial Accidents       Office of Investigations         600 Washington Street       Boston, MA 02111         www.mass.gov/dia       Workers' Compensation Insurance Affidavit: General Businesses         Applicant Information       Please Print Logibly					
Business/Organization Name: Classic Signs Inc	Please Print Legibly				
Address: 13 Columbia Drive					
City/State/Zip:Amherst, NH 03031	Phone #: 603-883-0384				
<ul> <li>Are you an employer? Check the appropriate box: <ol> <li>I am a employer with <u>12</u> employees (full and/or part-time).*</li> <li>I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]</li> <li>We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**</li> <li>We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]</li> </ol> </li> <li>*Any applicant that checks box #1 must also fill out the section below showing thei **If the corporate officers have exempted themselves, but the corporation has other organization should check box #1.</li> </ul>	Business Type (required):         5.       Retail         6.       Restaurant/Bar/Eating Establishment         7.       Office and/or Sales (incl. real estate, auto, etc.)         8.       Non-profit         9.       Entertainment         10.       Manufacturing         11.       Health Care         12.       Other         r workers' compensation policy information.         employees, a workers' compensation policy is required and such an				
I am an employer that is providing workers' compensation insura Insurance Company Name: Acadia Insurance	nce for my employees. Below is the policy information.				
Insurer's Address: C/O HPM Insurance 101 Ponemah Road					
City/State/Zip: Amherst, NH 03031					
Policy # or Self-ins. Lic. #_WCA 5320149-11	Expiration Date: 10/01/19				
Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date). Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.					
I do hereby certify, under the pains and penalties of perjury that the					
Signature: Martan Presiden;	Date: 6/20/19				
Phone #: 603-883-0384					
Official use only. Do not write in this area, to be completed by city or town official. City or Town: Permit/License # Issuing Authority (circle one): 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Licensing Board 5. Selectmen's Office 6. Other					
6. Other Contact Person: Phone #:					
www.mass.gov	//dia				

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#### CSC Franklin Village LP c/o Cedar Realty Trust Partnership, L.P.



Washington Center 415 Egg Harbor Road Suite 21A Sewell, NJ 08080 856,218,8677 May 15, 2019

Classic Signs Inc. 13 Columbia Drive #16 Amherst, NH 03031 Attn: Paul Tripp

RE: Proposed Signage | Franklin Village Shopping Center | Coldwell Banker | Space #26 Franklin, MA

Dear Paul,

On behalf of CSC Franklin Village LP and Cedar Realty Trust Partnership, LP, the proposed sign package for Coldwell Banker, provided by Classic Signs Inc., is hereby approved as submitted. This approval extends ONLY to the signage design as delineated on the stamped drawings that are attached. Please proceed with the necessary permits and/or variance to manufacture and install the Coldwell Banker sign(s).

Location: Coldwell Banker Residential Brokerage Franklin Village Shopping Center 250 Franklin Village Drive Franklin, MA 02038

CSC Franklin Village LP

Owner:

CC:

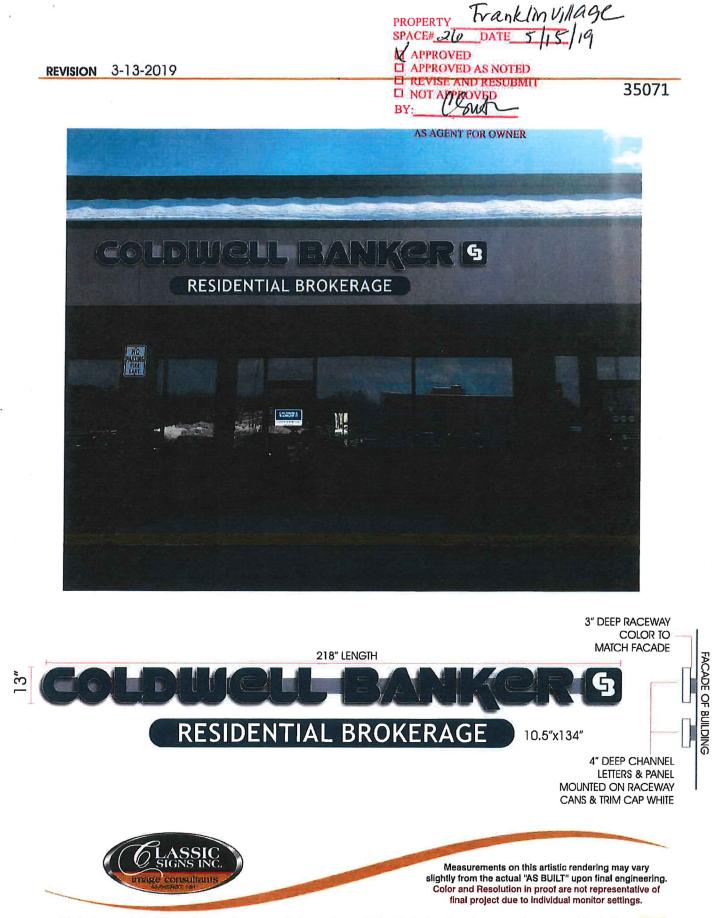
44 S Bayles Ave, Ste 304 Port Washington, NY 11050

All proposed signage must be in full compliance with the applicable Zoning, rules and regulations of the municipality having jurisdiction over the property where the proposed signage is to be located. Prior to installation of any proposed or replacement sign, the Tenant or Tenant's vendor must present the Landlord with a copy of any permits required by the authority having jurisdiction (typically, a village, Town, City, or County building permit and/or Zoning permit). When installation of the signage is complete, Tenant or Tenant's vendor must furnish Landlord with evidence the sign(s) were inspected and approved in accordance with the permit requirements.

Sincerely, As Agent for CSC Franklin Village LP

Christine B. Smith Construction Coordinator Cedar Realty Trust Partnership, LP

Mike Amenabar, Casey Fennell, Project File



This drawing protected by U.S. copyright laws. Any use, reproduction, copying or exhibiting this drawing without the express written consent of Classic Signs is illegal.



Please complete the following information regarding the property <u>where your sign is to be installed</u>. This will assist us in properly completing the Sign Permit Application required in order to place a sign on your property. Thank you.

Sign Location: FRanklin Village Shopping Center
Street Address: 250 FRAnklin Village Drive #26
City: City: Zip Code:
Customer/Tenant Name:
Address:
Phone: Email:
Owner of Record Name: CG Wanklin Village LP
Mailing Address: 44 South Bayles Ave Swite 304
Phone: 516-767-6492 Email: Part Washington, NY 11050
×
Zone/District: BWSINESS
Overlay District:
Historic District:Yes 📈 No
Map #/Lot #/Parcel #/Plot #: <u> </u>
ں Other information regarding the location of the property where sign is to be installed:
13 Columbia Drive, #16, Amherst, NH 03031 603.883.0384 www.ClassicSignsNH.com

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Development (0.01) (10.01





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#### FORM Q

#### **TOWN OF FRANKLIN DESIGN REVIEW APPLICATION** FOR §185-31(2) OF THE ZONING BY-LAW

A) General Information
Name of Business or Project: WW STUDIO
Property Address 289 ECENTRAL
Assessors' Map # Parcel #
Zoning District (select applicable zone):
Zoning History: Use Variance Non-Conforming Use
B) Applicant Information:
Applicant Name: BOB HANIGAN
Address: <u>87 FAY RD</u> FRAM, Ngham MA.
Telephone Number: <u>508 405 0912</u>
Contact Person: <u>BOB LANIGAN</u> Email Address: <u>INFO BOBS 516N SERVICE, Com</u> C) <u>Owner Information (Business Owner &amp; Property Owner if different)</u>
Business Owner: <u>WW STUDI</u> Address: <u>qq9 stewAFT AVE</u> <u>BETYPAGE NY 11714</u> <u>Property Owner: <u>FRANKLIN ShappEAS FAIR</u> <u>396 WASHING TON ST.</u> <u>Wollesley MA 02481</u></u>
All of the information is submitted according to the best of my knowledge Executed as a sealed instrument this day of 20

Signature of Applicant

Robert LANIGAN Print name of Applicant

Signature of Owner Agent

SEAN COAKley gog 868 2983 Print name of Owner

\*FOR SIGNS COMPLETE PAGES 1 & 2 ONLY. FOR SITE PLANS, BUILDING PLANS, PROJECTS, COMPLETE PAGES 1 - 4

SEE ADDENDA ATTACHED FOR ASSISTANCE IN COMPLETION OF FORM Q

#### D) Architect/Engineer/Sign Company Information (if not the applicant)

a. Sign Company	
Business Name: DB'S SIGN SERVICE INC	a
Contact Person: BOB /GENA	
Address 87 FAY RD FRAMINSham Mt 017	50
Telephone Number: 508 405 0912	

#### b. Architect/Engineer (when applicable)

Business Name:					
Contact Person:		• .			140 12
Address			•.	•	
Telephone Number:	 *			4	

#### E) Work Summary

Summary of work to be done: RepLACE EXISTING SIGNAGE WITH NEW NAME/LOSO

#### F) Information & Materials to be Submitted with Application

#### a) FOR SIGN SUBMISSIONS ONLY:

style of lettering

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lighting-illuminated, non-illuminated and style

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#### LANDLORD AUTHORIZATION

Today's date <u>9-24-19</u>

RE: Store Name Weight Watchers.

Store Number <u>#10535</u>

Store Address 289 East Contral St Tranklin MA 02038

To Whom It May Concern:

Please accept this as a Letter of Authorization providing <u>BOB'S SIGN SERVICE</u> and their contractors the authority to act on behalf of <u>Weightbaldwin</u> pursuit of upgrading our signage. This pertains to the following tasks in regard to signage for the <u>Weightbaldwin</u> s

E 10535 (Store number) (Store address) RIIN

- > Obtain all necessary permits and variance approvals.
- $\triangleright$  Engineering.
- Removals, patching, and painting.
- $\triangleright$  Installation.
- ➢ Electrical work.
- > Any additional work as per the job specifications.

Sincerely,

Marcia Your SIGNATURE MARCIA Your PRINTED name S. Ak Your title onorstair NC. Frankl Your company 305 396 Was Your Physical address leer ma Your Email address ahoo,com m 201 our Telephone number Your Fax number



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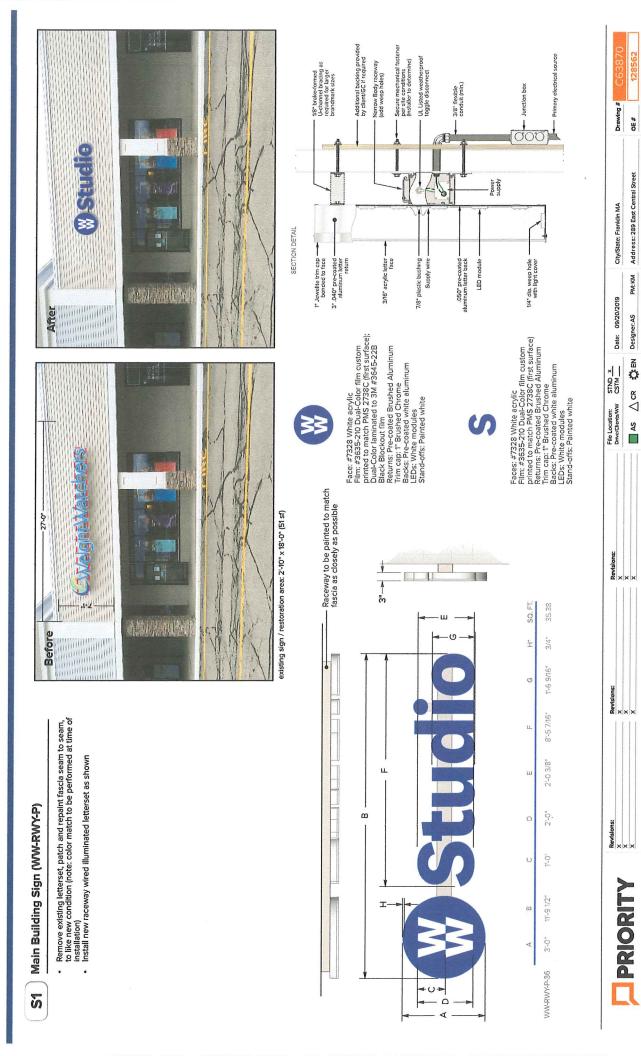
Proposed Branding For: City, State: Franklin MA Address: 289 East Central Street Site ID: 10535-Franklin Creation Date: 09/20/2019











# Tenant Panel (Qty. 2)

S2

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1. 2

- Remove existing tenant panels
   Verify illumination is in good working order
   Install new 3/6" with polycarbonate panels decorated first surface with vinyl as shown
   Cut size to be determined

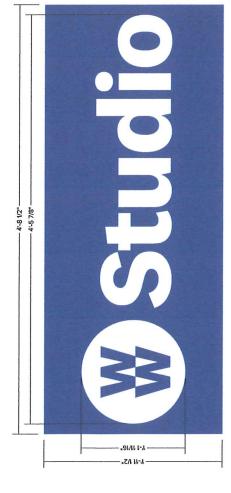
# COLOR SPECIFICATIONS

White polycarbonate substrate

Digitally printed translucent vinyl matching PMS 2738C







20.0	

#### Town of Franklin



#### **Design Review Commission**

#### Tuesday, October 8, 2019 Meeting Minutes

Chair Mark Fitzgerald called the above-captioned meeting to order this date at 7:00 PM, at the Franklin Municipal Building, 355 East Central Street, Room 205, Franklin, Massachusetts. Members in attendance: Chris Baryluk, Ralph Niemi. Members absent: Sam Williams, James Bartro.

#### Chairman Fitzgerald opened the meeting at 7:00 PM.

1. **Best Western Plus – 835 Upper Union Street** – Remove existing signage and install new front wall sign, rear wall sign, and monument sign on existing base

James Callahan of Callahan Sign, LLC, and Tom Walker of Hawthorn confirmed this is a rebranding of an existing building. Mr. Callahan stated the existing "Hawthorn" sign is rectangular at 7' x 12'; the new "Best Western Plus" sign will be 9' x 9'. The existing rear sign is 7' x 12'; the new sign will be 7.4' x 6.9'. The square footage will be less than what is existing. The signs will be internally illuminated like the existing signs. They will be removing the old sign and installing a new monument sign of 3' x 11' on the existing base; the square footage of the new sign area is less than what is currently existing.

**Motion:** To **Approve** the sign package as submitted. Motioned by C. Baryluk. Seconded by R. Niemi. Voted 3-0-0.

2. Franklin Transmission & Auto Care – 505 East Central Street – Replace existing awning and pylon faces

Cam Afonso of Signs by Cam reviewed the proposed signage. He stated the owner has a new logo and new design. The awning signage above the store front and the street sign will be replaced.

**Motion:** To **Approve** the sign package as submitted. Motioned by C. Baryluk. Seconded by R. Niemi. Voted 3-0-0.

3. Chateau Italian Kitchen & Bar – 466 King Street – Repairing sills, re-painting exterior walls and trim, new stone column covers at entry and new stone wainscot, new pylon sign and building signage

Gerry Fruggiero, Director of Operations for the Chateau Restaurant Group; Christopher Woodley, Landscaper of Christopher Woodley Company; and Bill Whitlock of Whitlock Design Group, addressed the Design Review Commission. They confirmed there was no change to the footprint of the building. They discussed the proposed landscaping as listed on the submitted plan. They will be keeping the outdoor seating. They confirmed the signage was approved by the Design Review Commission a few weeks ago. There is no drive-thru. They discussed the proposed colors. **Motion:** To **Recommend** the project package, textures and finishes, as submitted. Motioned by C. Baryluk. Seconded by R. Niemi. Voted 3-0-0.

#### Meeting Minutes: September 10, 2019 and September 24, 2019

**Motion:** To **Approve** the September 10, 2019 Meeting Minutes as presented. Motioned by C. Baryluk. Seconded by R. Niemi. Voted 2-0-1. (M. Fitzgerald abstained as he did not attend this meeting.)

**Motion:** To **Approve** the September 24, 2019 Meeting Minutes as presented. Motioned by C. Baryluk. Seconded by R. Niemi. Voted 2-0-1. (M. Fitzgerald abstained as he did not attend this meeting.)

General Matters: None.

**Motion** to **Adjourn** by C. Baryluk. Seconded by R. Niemi. Voted 3-0-0. Meeting adjourned at 7:22 PM.

Respectfully submitted,

Judith Lizardi Recording Secretary