

APPLICATION FOR ARCHITECTURAL DESIGN REVIEW APPROVAL

CITY OF CONCORD, NH - PLANNING BOARD

GENERAL INFORMATION

OWNER'S NAME: THE GRANITE GROUP INC

STREET ADDRESS: 6 STORES ST.

CITY, STATE, & ZIP CODE: CONCORD, NH 03301

TELEPHONE #: 603.491.1225 EMAIL ADDRESS: SMOORES@THEGRANITEGROUP.COM

AGENT'S NAME (IF APPLICABLE): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE, & ZIP CODE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

APPLICATION FEE \$ \_\_\_\_\_

For the property being reviewed, please complete the following:

TYPE OF DESIGN REVIEW: ☒ SITE IMPROVEMENTS ☐ NEW CONSTRUCTION ☐ RENOVATION

PROPERTY ADDRESS: 6 STORES ST. CONCORD NH

ABUTTING STREETS: SOUTH MAIN ST

EXISTING LOT SIZE(S): \_\_\_\_\_ ACRES OR \_\_\_\_\_ SQUARE FEET

ASSESSOR'S MAP/BLOCK/LOT #(s):   /  /     /  /     /  /  

ZONING DISTRICT(S): OCP

OVERLAY DISTRICTS (CHECK ALL THAT APPLY):

HISTORIC (HI): \_\_\_\_\_ SHORELAND PROTECTION (SP): \_\_\_\_\_ FLOOD HAZARD (FH): \_\_\_\_\_

AQUIFER PROTECTION (AP): \_\_\_\_\_ PENACOOK LAKE WATERSHED PROTECTION (WS): \_\_\_\_\_

PROJECT DESCRIPTION

Please provide a brief description of your project in the space below.

PROVIDE & INSTALL A NEW AIR-LOCK ENTRY TO  
THE NORTH SIDE OF THE BUILDING LOCATED @  
6 STORES ST. CONCORD NH

## REQUIRED INFORMATION

Please provide a detailed project narrative that describes the existing conditions of the property and the proposed improvements. Include with this project narrative photos of the existing structure and/or site from various vantage points and, as applicable, plans, elevations and details of the proposed work, including materials, colors, windows, landscaping, signage, and any other information that will help us understand your project.

YOUR PROJECT WILL NOT BE CONSIDERED COMPLETE WITHOUT A DETAILED PROJECT NARRATIVE.

## PROFESSIONAL SUPPORT

Please provide contact information for each professional involved in the preparation of this application, including the engineer, architect, surveyor, attorney, wetland scientist, landscape architect, etc.

NAME: NICHOLAS M. COZZARUSSO PROFESSION: DESIGNER

STREET ADDRESS: 334 DEER MEADOW RD.

CITY, STATE, & ZIP CODE: WEBSTER, NH 03503

TELEPHONE #: 860-559-0968 EMAIL ADDRESS: NICKC@CEDARMHGROUP.COM

NAME: \_\_\_\_\_ PROFESSION: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

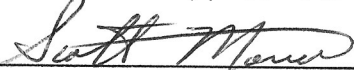
CITY, STATE, & ZIP CODE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

ATTACH ADDITIONAL SHEETS AS NECESSARY FOR ALL PROFESSIONALS INVOLVED WITH THE PROJECT

## ENDORSEMENTS

I hereby request that the City of Concord Planning Board review this application for Architectural Design Review approval, including all plans, documents, and information herewith. I represent to the best of my knowledge and belief that this application is being submitted in accordance with the Architectural Design Review Guidelines and all regulations of the City of Concord Planning Board. I also understand that submittal of this application for Architectural Design Review approval shall be deemed as granting of permission for the City staff, Planning Board members, and their designees to enter onto the property for purposes of inspection and review. Permission to visit the property extends from the date an application is submitted to the Planning Division until approved work or construction is complete and any or all of the financial guarantees have been returned to the applicant, or until or the application is formally denied.



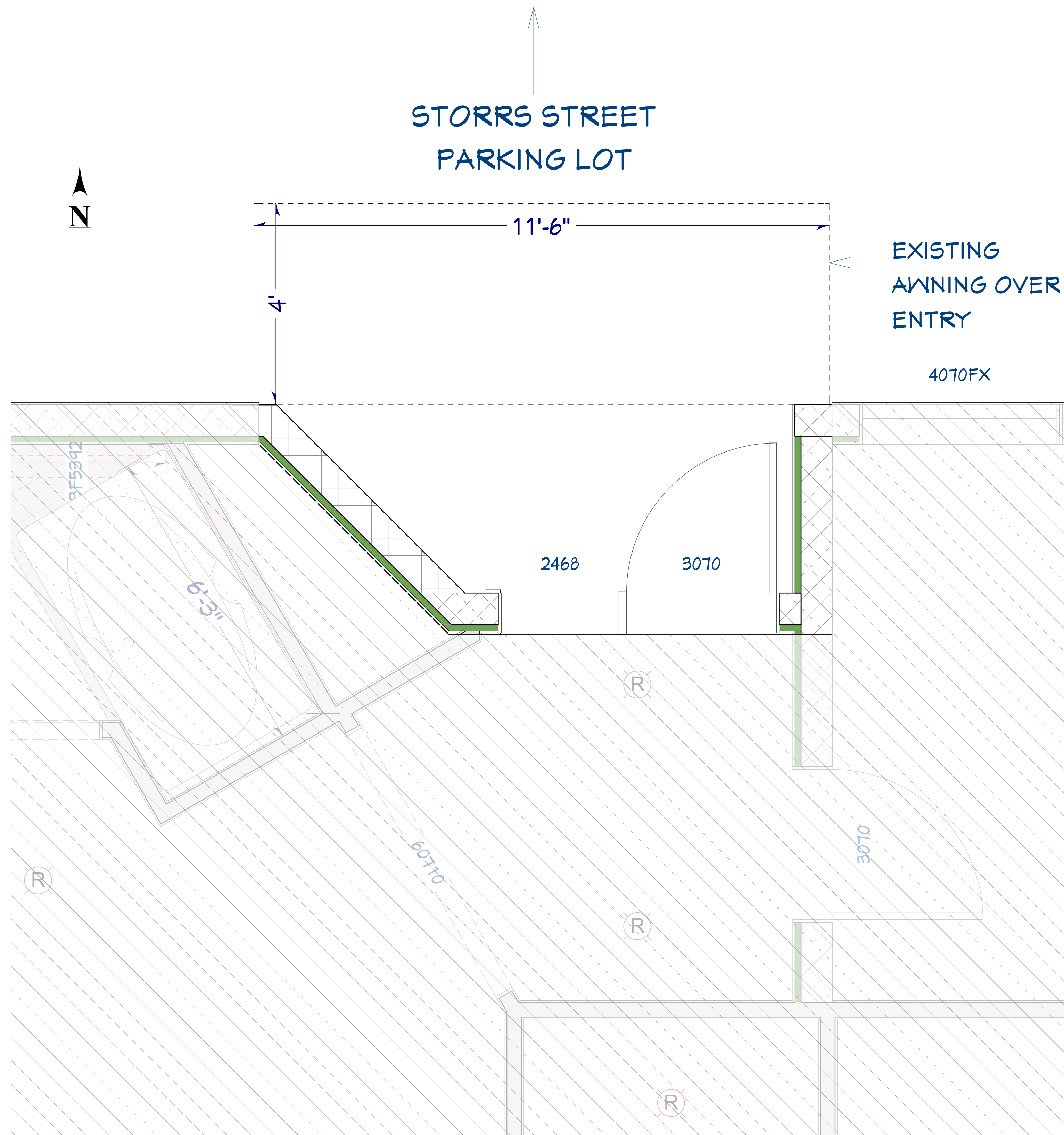
SIGNATURE OF PROPERTY OWNER

12/28/2020

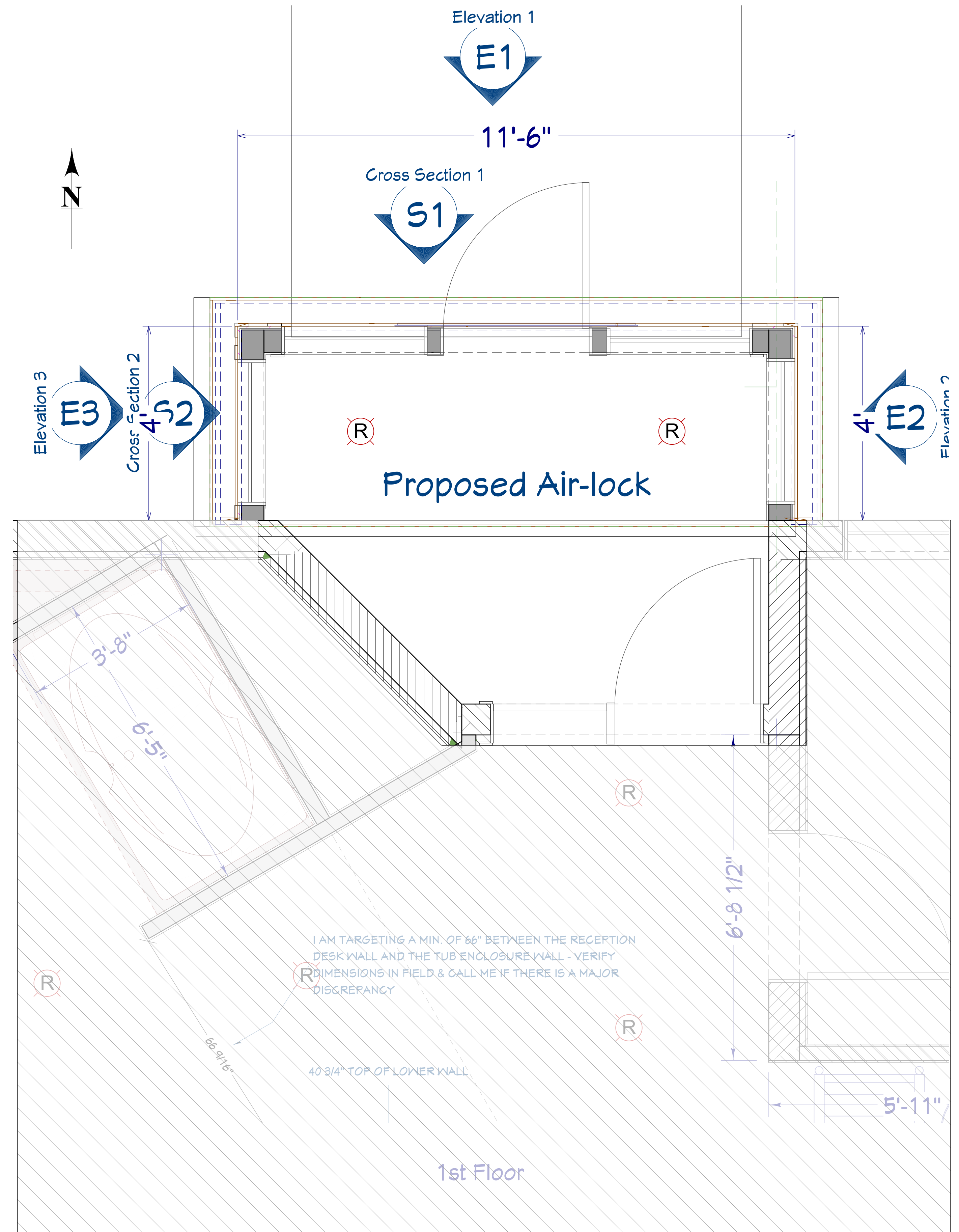
DATE

\_\_\_\_\_  
SIGNATURE OF AGENT (IF APPLICABLE)

\_\_\_\_\_  
DATE



EXISTING CONDITIONS  
SIDE SHOWROOM ENTRANCE



PROPOSED AIRLOCK AT  
SIDE SHOWROOM ENTRANCE





EXISTING CONDITIONS  
SIDE SHOWROOM ENTRANCE

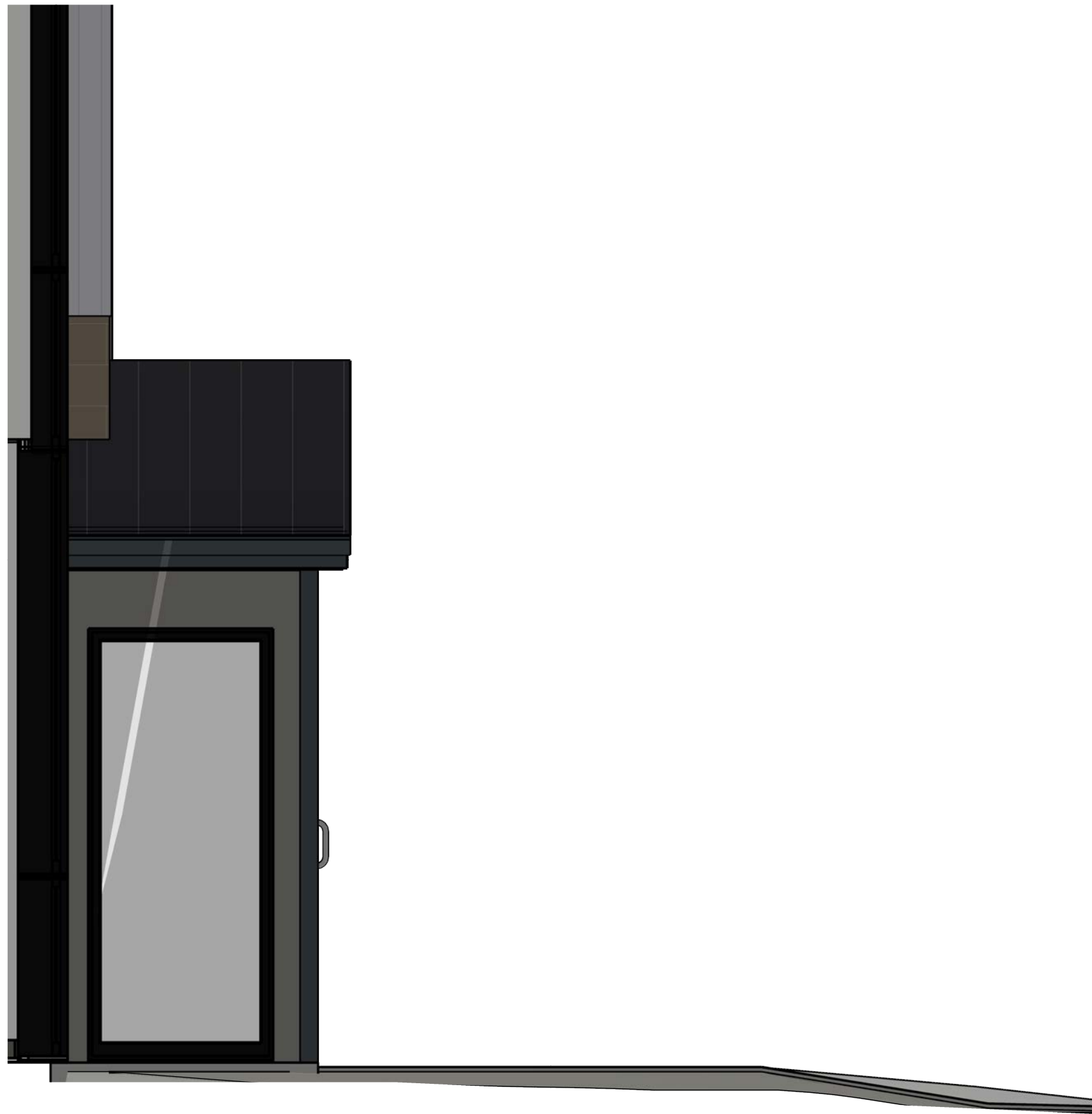


PROPOSED AIRLOCK ENTRANCE  
SIDE SHOWROOM ENTRY

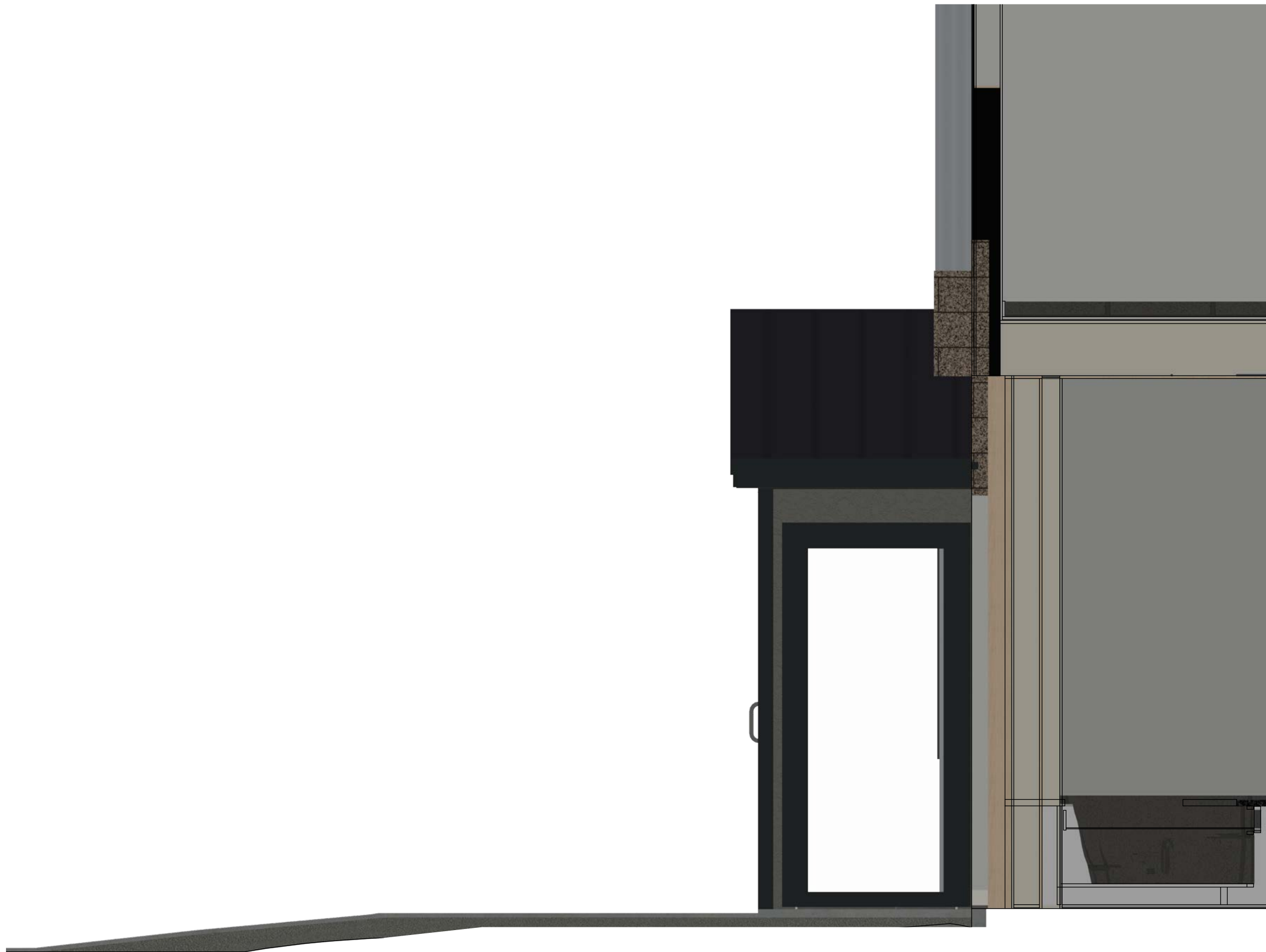




Elevation 1



Elevation 2



Elevation 3



