CERTIFICATE OF APPROPRIATENESS FORM

CITY OF NORTH TONAWANDA

CITY HALL 216 PAYNE AVENUE NORTH TONAWANDA, NEW YORK 14120 (716) 695-8555 FAX (716) 695-8557

NORTH TONAWANDA HISTORIC PRESERVATION COMMISSION APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

(Pursuant to Chapter 51C of the City Code)

APPLICANT INFORMATION
Applicant Name: Christin Rosewood Signs
Mailing Address: 400 Wales avenu Tonawande ny 14150
Telephone: 1435
E-mail: rosewoodsigno@aoi.com
If the applicant is acting through an authorized agent or legal representative, identify agent's name, address and telephone:
Does applicant own the property?: Yes No
If no, please explain: Contractor Sub mitting Daphicular

Owner's name, address, and telephone (if different from	applicant):	
Lon Riggio		
110 Sweeney Street		
N. Tenawonda, Ny 14120		
716-228-1113		
Is owner or applicant related to any official or employed North Tonawanda Historic Preservation Commission?	e of the City of No.	rth Tonawanda or the
	Yes	No
If yes, please explain:		
PROPERTY INFORM	ATION	
Property Address: 110 Swenny Street		
D. Tonawanda My		
Name of Property (if applicable): District 37		
Tax Map ID No.: 291200 185,09-1-14		
Zoning Classification: M		
Parcel Size: , 32 VV Acre		
Present Use of Property: fixwy restaurant apt	t comply	
Historic Use of Property: Was a retail location		
Is the property a designated Landmark?:	Yes	NT -
Is the property within a designated History, Design	108	No
Is the property within a designated Historic District?: _	Yes	No

PROJECT INFORMATION

Nature of the pr	roposed project (check all that apply):	
	Alteration	
	Restoration	
1	Reconstruction	
	Demolition	
	New Construction	
<u> </u>	Signage	
	Other Material Change (Describe):	
Is any part of the	e project visibile from the street or other public right of way?	
	Yes No	
Detailed Description of the Project (attach additional pages if needed): Installation of illuminated sign on 2 sides of buding		

NOTE: Attach photos of the property as it exists, along with historic photos if possible and detailed drawings of proposed changes, including materials to be used.

What are your reasons for undertaking this project?
To help promote visibily
Estimated time for completion: 2 months
If this application is denied would it pose a hardship for you:
X
Yes No
If yes, please explain: Customer is looking to promote business and make it
easier for potential customer to find to coting
CERTIFICATION
APPLICANT: I hereby certify that this application is accurate and complete to the best of my knowledge.
Applicant's Signature: Date: 16 - 6 - 23
OWNER: (if different from applicant, and if owner concurs in application): I have read and familiarized myself with this application and do hereby consent to its submission and processing.
Owner's Signature: Date: