***SUMMARY DATE****: June 29, 2021*

|  |
| --- |
| ***TOWN PLANNING STAFF SUMMARY SHEET*** *FROM: Michael J. Murphy, AICP, 860-885-8697/mmurphy@seccog.org* |
| ***APPLICATION / PROJECT NAME***Spirit of Halloween Temporary Signage |  | ***APPLICANT / PROPERTY OWNER***Spirit of Halloween |
| ***PUBLIC HEARING / DECISION TIMEFRAMES***N/A -65 days from July 6th |  | ***PROPERTY ADDRESS / LOCATION INOFORMATION***160 River Road |
| ***BRIEF SUMMARY OF REQUEST****This request is to install temporary signage in similar fashion to its request in 2020. The size proposed is 3’x 20’.**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****WAIVER REQUESTS: n/a*** | *SPIRIT OF HALLOWEEN* |
|  |  |  |  | *MAP SOURCE* |
| ***EXISTING ZONING****IP-1* | ***EXISTING LAND USE****Large Scale Retail*  | ***SURROUNDING ZONING & LAND USE****North:* *South: n/a**East:**West:* | ***SITE IMPROVEMENTS****TEMPORARY SIGNAGE*  | ***SIZE OF PROPERTY****N/A* |
|  |
|  | ***PLANNING STAFF ANALYSIS AND RECOMMENDATIONS*** |  |
| ***COMPATIBILITY / COMPLIANCE*** *with the POCD-2016 and other appropriate plans, policies or studies:*This site is zoned for commercial use a within a large scale retail operation. There are limits on the size of wall signs in these centers. | ***PROJECT HISTORY AND BACKGROUND:***The company has approached the town before with a similar request. The past sign that was approved was this size. The applicant complied with requirements to install and remove the sign as directed by the commission***.*** |
| ***LAND USE/ DEVELOPMENT COMPATIBILITY*** *with APPLICABLE REGULATIONS AND/OR DESIGN STANDARDS:*Staff has required a new zoning permit under the regulations to authorize this temporary signage; the company will occupy the former Pier 1 Imports site again. Section 15.8 requires approval of wall signs by the Planning and Zoning Commission. The width of signs on this building has been held to 3’ based on subsection f (2) of section 15.8. The length of 20’ should be no problem. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***RECOMMENDED ACTIONS, INCLUDING ANY MODIFICATIONS, CONDITIONS, REASONS FOR APPROVAL OR DENIAL, ETC.:*** ***Staff recommends approval of the application.***  |
|  |  |  |  |  |
| *ATTACHMENTS (CIRCLE):* | *SUBMITTED PLANS* | *APPLICATION FORM(S)* | *LEGAL NOTICE* | *LEGAL DESCRIPTION* |
|  | *PUBLIC COMMENT(S)* | *AGENCY COMMENTS* | *APPLICANT RESPONSE*  | *STUDY EXCERPTS* |
|  |  |  |  |  |
| ***OTHER*** *(DESCRIBE):*  |  |  |  |  |