

#2025-006

TOWN OF SALISBURY, CONNECTICUT HISTORIC DISTRICT
COMMISSION

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Curtis Rand 5 Academy St Salisbury

Owner Property Address Town

PO Box 452 Salisbury, Ct 06068

Owner's Mailing Address Town, State, Zip Code

860-287-9987 crand37@gmail.com

Owners phone number Email Address

Representative phone number (if applicable) Email Address

Type of Project (check all that apply):

- New building
- Addition to building
- Building restoration
- Demolition
- Ordinary maintenance, repair, 'in kind' exact replacement
- Work not visible from street or public pathway during any season
- Request 1-yr extension to complete work on already approved COA

Nature and description of proposed work. Attach photos and drawings:

Roof was leaking badly into the office, DJ Hall roofing said that he had a permit but by

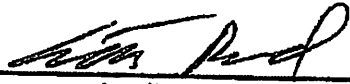
mistake we did not apply to SHDC. There was a 1 day, narrow window between storms

to replace the asphalt shingles. Work took 1 day.

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I acknowledge that I have read and accept the above instructions and am submitting an accurate and complete application. I give permission for members of SHDC to access the property for the purpose of reviewing this application and work done under the COA.

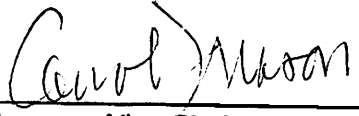

Owner or Applicant Signature

Curtis Rand 8/26/2025
Print name of Signature above Date

SHDC check off:
Application date received 9/2/2025

Day count end date: _____
It is determined what type of project the COA represents.

- Waived (not visible or 'in kind' exact replacement)
- Site Visit Required (maximum 2 months of SHDC) date: _____
- Incomplete/Not Accepted
- Accepted - Public Hearing date: _____
- Approved
- Grant 1-yr Extension on Already Approved COA # _____
- Denied


Chairman or Vice Chairman Signature 9/9/2025
Salisbury Historic District Commission Date