

#2026-1001

TOWN OF SALISBURY, CONNECTICUT HISTORIC DISTRICT
COMMISSION

APPLICATION FOR CERTIFICATE OF APPROPRIATENESS

Darren and Ellen Berger 50 Main St Salisbury Ct
Owner Property Address Town Dr. Smith House

P.O. Box 649 Salisbury, Ct. 04068
Owner's Mailing Address Town, State, Zip Code

646-957-3823 dsb 2113@gmail.com
Owners phone number Email Address

Tom Callahan 860-671-9901 tcallahan@harneyre.com
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:

Replacing 3 windows - in-kind replacement
Marvin Tru-lite wood interior and masonite exterior
All replacement windows will match current configuration
See attached document - Marvin

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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

Darren Berger

Feb 08, 2026

Print name of Signature above

Date

SHDC check off:

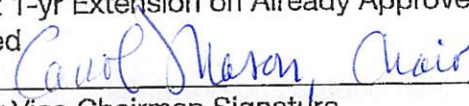
Application date received

2/10/26

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 members 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
Salisbury Historic District Commission

2/17/2026
Date