City of Torrington Planning and Zoning Commission Architectural Review Committee Architectural Review Form

Name and Address of Applicant:	Address of Project:		
PINERO ASSOCIATES, LLC	887 MIGEON AVE		
401 Mª MAHON DRIVE	AND 895 MIGEON AVE		
THOMASTON, CT 06787			
Phone: (860) 637-0056			
e-mail: mike ect confort control. com			
Name and Address of Owner:	of a com		
SAME AS APPLICANT	Zone: LB		
	Map? 22 Block: 05 Lot: 035		
	D 342 005 017		
Existing/Previous Use of Property:			
Gross Square Footage: VACANT LAND			
Previous Occupant/Use: 895 28 - 25 A CRES AND			
Other tenants/use of building: Proposed Use of Property:			
Proposed Use of Property:			
Proposed use of floor space:			
SELF STORAGE WAREHOUSE YNITS			
Describe the scope of the project, including all changes to the exterior, with proposed exterior materials/colors and alterations detailed Bring samples/cut sheet. (Attach materials schedule			
		if necessary).	
	W		
Planning and Zoning Status (if applicable) Has a Site Plan been submitted to Planning and Zoning for this project: Has this project been reviewed by the ARC prior to this submission?			
		If yes, date(s):	
		10/14/22	
	s Signature Date		
PETER C. HEROS			
ATTORNEY FOR APPR	20010		