



City of Keene
New Hampshire

**PLANNING, LICENSES AND
DEVELOPMENT COMMITTEE
AGENDA
Council Chambers A
June 23, 2021
7:00 PM**

Kate M. Bosley, Chair
Mitchell H. Greenwald, Vice Chair
Philip M. Jones
Gladys Johnsen
Catherine Workman

1. 2021 Fire Prevention Parade - Fire Department
2. Albert Grauer - Application for a Lodginghouse License - 85 Winchester Street
3. Cheshire Housing Trust - Application for a Lodginghouse License - 86 Winter Street
4. Hundred Nights, Inc. - Application for a Lodginghouse License - 15 Lamson Street.
5. Donna Forte - Application for a Lodging House - 57 Winchester Street
6. Continued Discussion – Parklets

Non Public Session
Adjournment



City of Keene
Transmittal Form

June 15, 2021

TO: Planning, Licenses and Development Committee

FROM: Mark Howard, Fire Chief

THROUGH: Elizabeth Dragon, City Manager

ITEM: 1.

SUBJECT: 2021 Fire Prevention Parade - Fire Department

RECOMMENDATION:

Move that the Planning, Licensing and Development Committee recommend that the Fire Department be granted permission to use City property for the 2021 Annual Fire Prevention Parade to be held on Sunday, October 3, 2021

BACKGROUND:

Annually, the fire department requests permission for use of City property and City streets for the Fire Prevention Parade. The parade kicks off Fire Prevention Week activities. This year we are requesting the use of the parking lot in the area of Fleet Services located at 350 Marlboro Street for the parade line-up. The parade will start at 1:00 pm at 350 Marlboro Street and proceed westerly along Marlboro Street to North on Main Street to Washington Street where it will disperse at Vernon Street. Following the parade there will be an awards ceremony at the Central Fire Station on Vernon Street. This parade will be held rain or shine.



City of Keene
Transmittal Form

June 15, 2021

TO: Mayor and Keene City Council

FROM: Albert Grauer

THROUGH: Patricia A. Little, City Clerk

ITEM: 2.

SUBJECT: Albert Grauer - Application for a Lodginghouse License - 85 Winchester Street

COUNCIL ACTION:

In City Council June 17, 2021.

Referred to the Planning, Licenses and Development Committee.

ATTACHMENTS:

Description

Lodging House License Application_Grauer

BACKGROUND:

Albert Grauer is submitting the annual application for a lodging house license for a lodging house located at 85 Winchester Street.



APPLICATION FOR OPERATION OF A LODGINGHOUSE

(Please print or type)

Date 6/9/21 Location of Lodginghouse 85 Winchester St

Identify local or national Fraternity or Sorority that members are pledged to (if applicable) _____

Property Owner Albert Grauer Business Phone 203-414-8058

Address 268 Rowland Road Fairfield, CT Home Phone 203-414-8058

Operator/Resident Agent Trevor Grauer Business Phone 203-414-8058

Address 25 Winchester Court Keene, NH Home Phone 203-414-8058

Number of Persons Authorized to reside on premises 8

I hereby certify that the information listed above is complete and accurate:

Albert Grauer
Signature of Property Owner

ALBERT F GRAUER JR
Name (Printed or Typed)

Trevor Grauer
Signature of Operator/Resident Agent

Trevor Grauer
Name (Printed or Typed)

I hereby certify that the above named Sorority or Fraternity is duly recognized by Keene State College, and is in good standing with the College:

Signature of College Representative

Name and Title (Printed or Typed)

(For Office Use Only)

Date Received June 14, 2021 Action Taken _____

Recommendations/Requirements

Police _____

Fire _____

Code Enforcement _____

City Clerk



City of Keene
Transmittal Form

June 15, 2021

TO: Mayor and Keene City Council

FROM: Linda Mangones/Cheshire Housing Trust

THROUGH: Patricia A. Little, City Clerk

ITEM: 3.

SUBJECT: Cheshire Housing Trust - Application for a Lodginghouse License - 86 Winter Street

COUNCIL ACTION:

In City Council June 17, 2021.

Referred to the Planning, Licenses and Development Committee.

ATTACHMENTS:

Description

Cheshire Housing Trust-Application for a Lodging House

BACKGROUND:

Cheshire Housing Trust is submitting their annual license application for a lodging house at 86 Winter Street.



APPLICATION FOR OPERATION OF A LODGINGHOUSE

(Please print or type)

Date 6/3/21 Location of Lodginghouse 86 Winter St.

Identify local or national Fraternity or Sorority that members are pledged to (if applicable) N/A

Property Owner Cheshire Housing Trust Business Phone 357-7603

Address 168 Castle St Home Phone NA

Operator/Resident Agent Cheshire Housing Trust Business Phone 357-7603

Address 86 Winter St Home Phone 358-5377 *resident manager*

Number of Persons Authorized to reside on premises 18 in rooms / 2 in manager's apt

I hereby certify that the information listed above is complete and accurate:

[Signature]
Signature of Property Owner

Linda Mangomez, Executive Director
Name (Printed or Typed)

Signature of Operator/Resident Agent

Name (Printed or Typed)

I hereby certify that the above named Sorority or Fraternity is duly recognized by Keene State College, and is in good standing with the College:

NA
Signature of College Representative

NA
Name and Title (Printed or Typed)

(For Office Use Only)

Date Received June 14, 2021 Action Taken _____

Recommendations/Requirements

Police _____

Fire _____

Code Enforcement _____

City Clerk



City of Keene
Transmittal Form

June 15, 2021

TO: Mayor and Keene City Council

FROM: Mindy Cambiar/ Hundred Nights, Inc.

THROUGH: Patricia A. Little, City Clerk

ITEM: 4.

SUBJECT: Hundred Nights, Inc. - Application for a Lodginghouse License - 15 Lamson Street.

COUNCIL ACTION:

In City Council June 17, 2021.

Referred to the Planning, Licenses and Development Committee.

ATTACHMENTS:

Description

Application for Lodging House

BACKGROUND:

Hundred Nights is submitting their annual license application for a lodging house at 15 Lamson Street.



APPLICATION FOR OPERATION OF A LODGINGHOUSE

(Please print or type)

Date 6/14/21 Location of Lodginghouse 15 Lamson St Keene

Identify local or national Fraternity or Sorority that members are pledged to (if applicable) _____

Property Owner Patti Moreno Business Phone 617 980 1814

Address 17 Roxbury St Keene NH 03421 Home Phone 617 980 1814

Operator/Resident Agent Mindy Cambiar Business Phone 603 352-5197
Hundred Nights Inc

Address 15 Lamson St Keene NH 03421 Home Phone 603 667 1481

Number of Persons Authorized to reside on premises 26

I hereby certify that the information listed above is complete and accurate:

Patti Moreno
Signature of Property Owner

PATRICIA MORENO
Name (Printed or Typed)

Mindy Cambiar
Signature of Operator/Resident Agent

Mindy Cambiar
Name (Printed or Typed)

I hereby certify that the above named Sorority or Fraternity is duly recognized by Keene State College, and is in good standing with the College:

Signature of College Representative

Name and Title (Printed or Typed)

(For Office Use Only)

Date Received _____ Action Taken _____

Recommendations/Requirements

Police _____

Fire _____

Code Enforcement _____

City Clerk



City of Keene
Transmittal Form

June 18, 2021

TO: Planning, Licenses and Development Committee

FROM: Donna Forte

THROUGH: Patricia A. Little, City Clerk

ITEM: 5.

SUBJECT: Donna Forte - Application for a Lodging House - 57 Winchester Street

ATTACHMENTS:

Description

Application_57 Winchester Street

BACKGROUND:

Donna Forte is submitting her annual request for the licensing of a lodging house at 57 Winchester Street.



APPLICATION FOR OPERATION OF A LODGINGHOUSE

(Please print or type)

Date 06/17/2021 Location of Lodginghouse 57 Winchester St.

Identify local or national Fraternity or Sorority that members are pledged to (if applicable) _____

Property Owner Donna Forte Business Phone 603 903 4078

Address 281 Moran Rd. Yorkinton NH Home Phone _____

Operator/Resident Agent Brianna Glasser Business Phone 603 924 4138

Address 23 Rabston St. Keene NH Home Phone _____

Number of Persons Authorized to reside on premises 14

I hereby certify that the information listed above is complete and accurate:

Donna Forte
Signature of Property Owner

Donna J Forte
Name (Printed or Typed)

Brianna Glasser
Signature of Operator/Resident Agent

BRIANNA GLASSER
Name (Printed or Typed)

I hereby certify that the above named Sorority or Fraternity is duly recognized by Keene State College, and is in good standing with the College:

Signature of College Representative

Name and Title (Printed or Typed)

(For Office Use Only)

Date Received 6/18/2021 Action Taken _____

Recommendations/Requirements

Police _____

Fire _____

Code Enforcement _____

City Clerk