

RECEIVED

By Linda Amerighi at 3:05 pm, May 06, 2021

SHARON BOARD OF SELECTMEN
REGULAR MEETING

MAY 11, 2021

3:00PM AGENDA

In person and VIA ZOOM

<https://us02web.zoom.us/j/8727483273>

Meeting ID: 872 748 3273

1. Call to order
2. Adopt agenda
3. Public comment on agenda items
4. Minutes: 4/27/21
5. Four day work week for Town Crew
6. Tax refund requests
7. Applications for Use of Sharon Green - 2
8. Speeding - Hilltop Road update
9. The Tour of Litchfield Hills – use Town Roads & beach parking lot as a rest stop
10. Fuel bids to go out to be returned no later than June 8, 2021
11. Community Update
12. Adjourn

REQUEST FOR ABATEMENT OR REFUND OF PROPERTY TAXES

SEC. 12-81 (20), SECS. 12-126, 127, 128, 129 1958 REV. AS AMENDED

This is to certify that COURTNEY & ADAM BRAMMER

has presented satisfactory proof that — he is entitled to exemption on the assessment list of

- ☐ Sec. 12-81 (20) — Servicemen having Disability Rating.
- ☐ Sec. 12-126 — Tangible Personal Property Assessed in more than one Municipality.
- ☐ Sec. 12-127 — Abatement or Refund to Blind Persons.
- ☐ Sec. 12-128 — Veterans Refund of Tax Erroneously Collected.
- ☒ Sec. 12-129 — Refund of Excess Payments.
- ☐ P.A. 74-56 — Refund of Tax Relief for the Elderly.

1

I, Joana Christensen Town Clerk - Assessor
Collector of Sharon
Town or City

State of Connecticut
COURTNEY & ADAM BRAMMER of 104 BAY ST.
(Address)

in the town of SHARON CT hereby apply for abatement or refund of such
part of my tax as shall represent:

the service exemption
or

over pay
(State return — Cross out service exemption if it does not apply)

Date Paid	Amount Paid	Assessment Date	Due and Payable on	Property Tax	Interest	Lien Fee	Costs	Total
2/22/21	1128.96	10/1/19	7/1/20	1128.96				1128.96
		10	10					
		10	10					

(Signature of Taxpayer)

COLLECTOR'S RECOMMENDATION TO THE GOVERNING BODY

I, the Board of Selectmen, Common Council or
Governing Body

do recommend that an abatement or refund** of property taxes in the amount of 1128.96
be made to the above-named taxpayer in accordance with the provisions of:

Secs. 12-81 (20), 12-126, 12-127, 12-128 — Sec. 12-129

(Cross out those which do not apply)

Dated at Sharon, Conn., the 28th day of April 2021.
Joana Christensen
Tax Collector of

Town or City

APPLICATION FOR USE OF THE SHARON GREEN FOR EVENTS

Submit Application at Least One Month in Advance

#2
FOR JULY

DATE

04/27/2021

ORGANIZATION

STANDARD SPACE GALLERY

PERSON APPLYING FOR PERMIT

THEO COULOMBE

ADDRESS

147 MAIN STREET 0

TOWN & ZIP

SHARON 06069

TELEPHONE

917-627-3261

EMAIL

THEO@THEOCOULOMBE.COM

DATE OF ACTIVITY

07/02 OR 03/2021

Activity Planned ONE PERSON MUSICAL PERFORMANCE AFTER NOON
30 PRC OR LESS / WEBCAST

Is there a fee charged to attend or participate in the activity? Yes _____ No ☒

Is the activity Private _____ or Public ☒


Will alcohol be sold? Yes _____ No ☒

Will alcohol be available? Yes ☒ No ☒ AT THE GALLERY AFTER THE PERFORMANCE

Is the Event a Bring Your Own Alcohol? Yes _____ No ☒

The authorized person(s) whose name(s) appear below, agree that the organization will abide by the rules and regulations prescribed by the Town of Sharon Green Committee. It is also agreed that all individuals and/or groups will provide proof of liability insurance with general liability coverage of one (1) million dollars each occurrence, two (2) million aggregate. An organization must supply a Certificate of Insurance and an individual binder of personal liability insurance. Any damage whatsoever to any of the facilities or parts thereof shall be paid for by the authorized persons.

SIGNATURES AND PHONE NUMBERS OF THREE PERSONS RESPONSIBLE

1)  917-627-3261

2) _____

3) _____

Date 04/27/2021 Insurance Certificate LOCKED AFFINITY LLC 762-GL-20016976-00 Approved _____

Return to: Town of Sharon Green Committee, PO BOX 385, Sharon, CT 06069

4/12/2021

4/27

APPLICATION FOR USE OF THE SHARON GREEN FOR EVENTS

Submit Application at Least One Month in Advance

RECEIVED
Town of Sharon
4/30/21

DATE

ORGANIZATION

PERSON APPLYING FOR PERMIT

ADDRESS

TOWN & ZIP

TELEPHONE

EMAIL

DATE OF ACTIVITY

Activity Planned

Is there a fee charged to attend or participate in the activity? Yes

No

Is the activity Private

or Public

Will alcohol be sold? Yes

No

Will alcohol be available? Yes

No

Is the Event a Bring Your Own Alcohol? Yes

No

The authorized person(s) whose name(s) appear below, agree that the organization will abide by the rules and regulations prescribed by the Town of Sharon Green Committee. It is also agreed that all individuals and/or groups will provide proof of liability insurance with general liability coverage of one (1) million dollars each occurrence, two (2) million aggregate. An organization must supply a Certificate of Insurance and an individual binder of personal liability insurance. Any damage whatsoever to any of the facilities or parts thereof shall be paid for by the authorized persons.

SIGNATURES AND PHONE NUMBERS OF THREE PERSONS RESPONSIBLE

1)

2)

3)

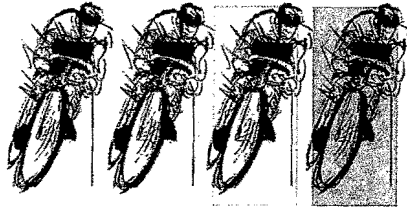
Date

Insurance Certificate

Approved

Return to: Town of Sharon Green Committee, PO BOX 385, Sharon, CT 06069

4/12/2021



THE TOUR

OF THE LITCHFIELD HILLS

www.tourofthelitchfieldhills.com

Brent Colley, First Selectman
Town Hall
Main Street
Sharon, Ct. 06069

Re: 17th Annual Tour of the Litchfield Hills
Sunday, August 1, 2021

Dear Mr. Colley:

On Sunday, August 1st, Charlotte Hungerford Hospital and the Cancer Care Fund of the Litchfield Hills, Inc. will sponsor the 17th Annual Tour of the Litchfield Hills, a charity bicycle ride and walk to benefit the Cancer Care Fund of the Litchfield Hills, Inc.

The event will originate at Coe Park in Torrington. The routes pass through the Towns of Litchfield, Goshen, Norfolk, Canaan, North Canaan, Salisbury, Winchester, Colebrook, Sharon, Washington, Warren, Morris, and Cornwall. In your town, the Tour will use Rt. 4, Rt. 41, Rt. 361, Rt. 343, Sharon Valley Road, Mudge Pond Road, Williams Road, Calkinstown Road, West Cornwall Road, and Rt. 128.

This event is a charity ride - not a race. The bicycle riders will be reminded that they must observe the rules of the road. No roads are to be closed. There will be several rest stops along the way as well as support vehicles to assist riders who experience mechanical difficulties. We expect to draw roughly 1,200 riders for this event. The web site for the event is www.tourofthelitchfieldhills.com.

The Connecticut Department of Transportation requires that the Tour obtain from your legal Traffic Authority written authorization for this event. Attached please find a draft letter authorizing the Tour to pass through your Town.



www.tourofthelitchfieldhills.com www.tourofthelitchfieldhills.com

We are also requesting the use of the Town Beach parking lot as a rest stop for the cyclists. We would like to place a porta potty at this location. The porta potty would be placed there on the Friday before the Tour and removed on the Monday after the Tour.

Please scan (mnpdc@outlook.com) or mail (Dr. Matt Pagano, 179 North Main St, Winsted CT 06098) or fax (860-379-3373) this form to us by **Thursday, May 13th**.

If you have any questions, please contact me at (cell) 860-307-7523 or (office) 860-379-3372. Thank you for your assistance in this matter.

Sincerely,

Matthew Pagano
Tour of the Litchfield Hills Chairman

Cc: file