

Village Of Airmont
Building & Zoning Department
251 Cherry Lane, P.O. Box 578
Tallman, New York 10982

(845) 369-8813 * FAX (845) 357-8307

SIGN PERMIT

Date: _____ Permit #: _____

I. **OWNER**

Applicant: _____ Phone #: _____

Address: _____

*Owner of Property: _____

Sign Contractor: _____

Address: _____

*(Copy of property owners consent form to be attached to this application).

II. **TYPE & LOCATION**

Check all that apply:

Existing _____ Wall _____ Free Standing _____

Non-Confirming Existing _____ Projecting _____

New _____ Change of Lettering Only _____

Previous Sign Plan Approval _____ List Date _____

LOCATION: Section: _____ Block & Lot: _____ Zoning Dist: _____

Address of Property: _____

Building or Lot Use: _____

Describe the Relationship of Sign to Street Lines, Structures or Nearby Buildings: _____

SIGN PERMIT (cont'd)

SUBMIT: Site or Plot Plan, elevation drawings to scale or photographs showing exact location, facing direction and type of sign.

III. **DESIGN**

Describe the shape and dimensions of the sign. Also identify the message, lettering, graphics, color and material. Attach sketch to scale with descriptions.

If sign is to be placed upon a building façade or within a store window, submit plans and elevations of the building façade or store window, including all other signs on building and property.

IV. **ILLUMINATION**

If sign is to be illuminated, indicate method and source of illumination.

CHECK: Indirect: _____ Within: _____ Overhead: _____
Below: _____ Spots and #: _____
Sides (Facing): _____
Wattage: _____ Wiring: Underground: _____
Overhead: _____

New York Board of Fire Underwriters Certificate is required for all illuminated signs. Must be filed and installed by Rockland County Licensed Electrician.

V. **CONSTRUCTION**

Illuminated sign boxes must bear a U.L. label for box and all components.

Construction of and installation of signs must meet requirements of N.Y. State Uniform Fire Prevention and Building Code.

AFFIDAVIT OF OWNERSHIP

STATE OF NEW YORK)

)SS:

COUNTY of _____)

I, _____, being duly sworn, deposes and says that she/he resides at _____ in _____, County of _____, State of _____, that he is the owner in fee of all that certain lot, piece of parcel of land situated, lying and being on the Village of Airmont Tax Map and that hereby authorize in his behalf the filing of an application for a Building Permit and/or Certificate of Occupancy, and that the statements of fact contained in said application are true.

Owner's Signature

Street

City

State

Zip

Sworn to before me this _____ day of _____, 20____.

(Notary Public)

Official Use

Permit granted for _____

Date

Building Inspector