

Village of Delanson

P.O. Box 235 Delanson, NY 12053
Phone (518) 895-2199



APPLICATION FOR SIGN PERMIT

Instructions: The following information must be completed and submitted with a rendering of the proposed sign(s) and a site plan showing the location of the proposed sign(s) in relation to buildings and/or lot lines and roads. ALL plans shall bear signature, mailing address and daytime phone # of the person responsible for design of sign. A colored rendering of the sign shall include the following:

- Dimensions on all items, including letters or symbols on signs.
- Proposed wording on sign
- Colors shown to be exactly as actual sign.
- Materials used

If the applicant is not the property owner, a notarized letter of permission is required from the owner of the property to allow such a sign to be constructed on their property.

Date: _____ Permit # (office use only) _____

APPLICANT INFORMATION:

Name: _____ Property Owner: _____

Mailing Address: _____ Mailing Address: _____

Daytime Phone: _____ Daytime Phone: _____

Property Address: _____

Location of proposed sign

Tax Map # _____

SIGN TYPE: (mark an X where appropriate)

One sided _____ Two sided _____

Wall _____ Pole _____ Roof _____ Ground _____

If Building or Wall Mounted, what is the length of the building frontage? _____

Other (Please Describe) _____

Permanent _____ Temporary _____ If temporary, indicate length of time requested _____

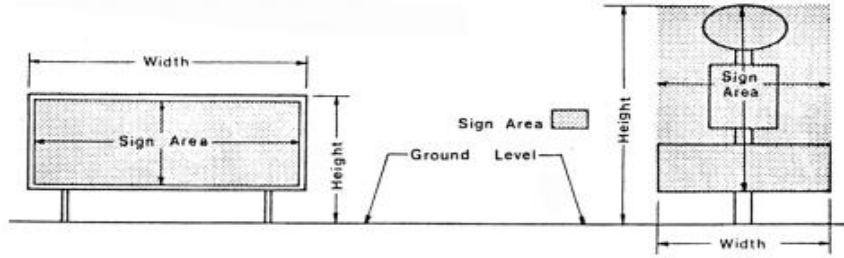
ILLUMINATION:

None _____ Internal _____ External _____

If external, where would lighting be placed? _____

Illuminated signs shall be non-flashing and non-animated and the source of light shall not be directed into any street or highway that might cause distraction, confusion, glare to vehicular traffic or nuisance to adjoining properties,. Fluttering banners, pennants and similar advertising devices such as oscillating lights or rotating devices are prohibited. Signs shall not be installed in Town, State or Village Right of Ways.

SIGN DIMENSIONS:



Total Area of Sign _____

Total height of sign from ground level _____ Width of sign _____

Distance from ground level to bottom of sign. _____

Are there other signs on the property? Yes No

Total sq. ft. of other signs on property _____

Is this sign replacing an existing sign? Yes No

Is this sign for: Home Business Commercial Business Public Information

Total sq ft of all signs combined on property _____

Distance from Road _____

ELECTRICAL CERTIFICATION (for illuminated signs):

For Illuminated signs, all electrical work must be performed by a licensed electrical contractor.

The undersigned certifies that:

_____,
Name of Electrical Contractor License #

Address

City & State Zip _____ has been retained by

_____, for the for installation of above sign at
Owner/Applicant

Property Address, City, State Zip

Signature of Electrical Contractor _____ Date _____

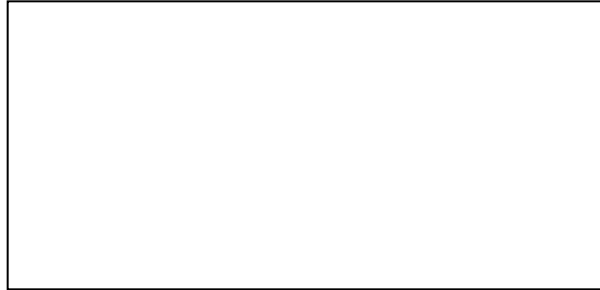
I swear that to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are a true and complete statement of all proposed work to be done on the described premises and that all provisions of the Village of Delanson Ordinance, and all other laws include building codes pertaining to the proposed work shall be complied with, whether specified or not, and that such work is authorized by the owner.

Signature of Applicant _____ Date _____

APPLICANT MUST NOTIFY VILLAGE WHEN READY FOR A FINAL INSPECTION

On this _____ 20 _____ the Planning Board has:
Approved _____ Disapproved _____ Referred to the ZBA _____
this application for a sign permit.

Permit # _____ Tax Map # _____



Planning Board Approval Stamp

If approved, this permit is shall become invalid upon the discontinuance of said business and the sign must be promptly removed from premises. Any alterations in wording, size or location of said sign will invalidate this permit.

Temporary signs must be removed promptly after it has fulfilled its function.

APPLICANT MUST NOTIFY VILLAGE WHEN READY FOR A FINAL INSPECTION

Final inspection was performed on: _____ By: _____

Comments:
