



INCORPORATED

Village of Atlantic Beach

65 THE PLAZA
P.O. BOX 189
ATLANTIC BEACH, N.Y. 11509
(516) 371-4600 FAX (516) 371-4631

email: building@atlanticbeachny.gov

APPLICATION FOR SIGN PERMIT

Section 58 Block _____ Lot(s) _____

FEE: _____ \$5.00 per sq. ft.

Indicate on plot plan on third page of this application, the location of proposed sign and its distance from streets and adjoining property lines.

Submit 2 sketches (8 1/2" x 11") indicating overall dimensions of sign and whether or not copy is changeable.

1. LOCATION OF PROPERTY: _____
(side of street; distance in feet to nearest intersection)

2. ADDRESS OF PROPERTY: _____

3. APPLICANT NAME - ADDRESS - TELEPHONE NUMBER: _____

4. OWNER OF PROPERTY: NAME - ADDRESS - TELEPHONE NUMBER: _____

5. PRINCIPLE USE OF BUILDING: _____

6. CIRCLE NO. APPLICABLE TO SUBJECT SIGN:

- | | | |
|-----------------|-------------------|------------------|
| 1. Awning | 7. Identification | 13. Projecting |
| 2. Canopy | 8. Mobile | 14. Sale or Rent |
| 3. Construction | 9. Multi-faced | 15. Wall |
| 4. Detached | 10. Occupancy | 16. Window |
| 5. Directional | 11. Poster | 17. Marquee |
| 6. Facade | 12. Professional | 18. Other _____ |

7. IS SIGN? Temporary _____ or Permanent _____ (check one)

8. SIZE (feet or inches) _____ (length) _____ (height) _____ (total area) _____ sq. ft.

9. ILLUMINATION:
(a) Is proposed sign to be illuminated? NO _____ YES _____
(b) Is existing sign to be illuminated? NO _____ YES _____
AREA _____ sq. ft.

- 10. NAME OF INSTALLER (Sign Co.) _____
- 11. AFFIDAVIT REQUIRED BY ALL SIGN AND AWNING MANUFACTURERS STATING THE SURFACE FLAME SPREAD RATING OF ALL COMBUSTIBLE FACINGS.
- 12. IF PROPOSED SIGN IS TO REPLACE EXISTING SIGN INDICATE:
 - (a) Existing Sign Area: _____ sq.ft.
 - (b) Permit # _____
- 13. IF APPLICANT IS NOT THE OWNER OF THE PROPERTY UPON WHICH THE PROPOSED SIGN IS TO BE ERECTED THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE OWNER:

I, _____ the owner of the property upon which the proposed sign, as listed in the application, is to be erected and that permission is hereby granted to the applicant named herein for the erection of such sign.

Signature of the Owner

STATE OF NEW YORK)
COUNTY OF NASSAU)

Sworn to before me this ____ day of _____,

NOTARY PUBLIC

- 14. THE APPLICANT SHALL AGREE TO THE FOLLOWING:

In consideration of being granted the permit hereby applied for, it is agreed that the applicant will comply with the requirements of the Village of Atlantic Beach now in force or which may in the future be promulgated for the use and erection of signs. PENALTY FOR FALSIFICATION: Falsification of any statement made herein may subject the permit associated with this application, to revocation.

Signature of Applicant

STATE OF NEW YORK)
COUNTY OF NASSAU)

Sworn to before me this ____ day of _____,

NOTARY PUBLIC

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BUILDING AND PLOT DIAGRAM

Lot lines and exterior walls must be shown. Show dimensions of building, courts and yards.

FOR OFFICE USE ONLY

APPLICATION INSPECTION BY: _____ DATE: _____

DISPOSITION: _____

BUILDING INSPECTOR
Inc. Village of Atlantic Beach