

# APPLICATION FOR SIGN PERMIT

NORTH CASTLE BUILDING DEPARTMENT  
17 BEDFORD ROAD ARMONK, NY 10504  
PHONE # (914) 273-8625

The undersigned, in accordance with the SIGN REGULATIONS of the Town of North Castle and structural requirements of the NYS Building Code, hereby applies for a permit to erect sign(s) as listed herein, and further agrees to notify the Building Inspector when installation is complete:

Property Location: \_\_\_\_\_

**Section:** \_\_\_\_\_ **Block:** \_\_\_\_\_ **Lot:** \_\_\_\_\_ **Zoning District:** \_\_\_\_\_

Owner: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Zip: \_\_\_\_\_

Agent or \_\_\_\_\_ Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Lessee: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Zip: \_\_\_\_\_

Type of Sign to be Erected:

Free Standing \_\_\_\_\_ sq. ft.  
Building Sign \_\_\_\_\_ sq. ft.  
Other \_\_\_\_\_ sq. ft.

Permit Fee: \$ _____
C.C. Fee: \$ _____
<b>TOTAL: \$ _____</b>

Fee Schedule: \$5 for first 10 ft., 50¢ each addt'l sq. ft. or fraction thereof
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How many feet of building frontage exist? \_\_\_\_\_

Does this sign reflect a change of use at premises? **YES** OR **NO**

ATTACH PLAN SHOWING LOCATION OF SIGN WITH RESPECT TO PROPERTY LINE OR PLACEMENT ON BUILDING. INDICATE DIMENSIONS, STRUCTURAL DETAILS, TEXT, MATERIALS TO BE USED, AND ILLUMINATION DETAILS. INCLUDE FRONT & SIDE ELEVATIONS OF SUBJECT BUILDING.

**Wording of Sign:** \_\_\_\_\_

SIGN PERMITS REQUIRING PLANNING BOARD APPROVAL

- 1) All new commercial construction
- 2) Existing commercial building with use change requiring additional parking

In these cases, the Planning Board must review the Sign Permit Application, the detailed sign plans, and the site plan. Three extra sets of these items must accompany this application and a \$ \_\_\_\_\_ fee is required.

Fees Received: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Plans Received: \_\_\_\_\_ Approval Granted: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_