		Permit No.:		
Please attach rendering, elevati	on & plan draw	ings to scale (including l	andscaping)	
Erect a sign	Alter a sign	Move a sign		
Sign Location:		Zoning 2	District:	
Owner of Premises:				
Applicant Name:	Cont			
Address:	Addr	ess:		
City, State, Zip	State, Zip	State, Zip		
hone:Ph		ne:		
Type of Sign: (check all that apply) Billboard Sign	or temporary)	Off Premises Sign (less than 80 SF) Temporary/Mobile S (not permanently mounted) Wall Sign (projecting no more than 12") Window Sign (inside or facing outside to be	Sign	
Illuminated Electric	Neon	Metal	Wood	
Sign Width:	Sign Height:			
Sign Face Area:sq. ft.	Total area o	of both sides:	sq. ft.	
Lower edgefeet above grade (2' minimum)	Upper edge _(8' maximum)	feet a	bove grade	
Sign extends feet above building	ng			
Will sign obstruct any fire escape, window	or door? Yes _	No		
Will Sign conform to all Village ordinance	es? Yes_	No		
How will sign be secured to building or gr	ound?			
Wording on Sign:				
Sign Review by Planning Board	\$100.00	Date:		
Permit Fee	\$ 50.00	Check # Cash:		
Amount Paid	S	Debit:		

Show location of sign on plot plan below, giving all distances to the nearest foot:						
	I	Rear				
Side			Side			
	Street					
I here	I hereby consent to the foregoing application for a sign permit as owner of the premises:					
	Property Owner Signature	Address& Phone #				
	Examined by Building Inspector Permit issued by Building Inspector					
	-OR-					
	Referred to Planning Board for Approval					
Appr	roved By:	Date:				