

VILLAGE OF FISHKILL BUILDING DEPARTMENT
1095 MAIN STREET-VAN WYCK HALL
FISHKILL, NY 12524
845-897-4430 FAX 845-896-4546

APPLICATION FOR SIGN PERMIT

(Please read and comply with the Village of Fishkill Zoning Code before completing this application)

Name of Business _____

Location of Sign _____

Applicant Name & Phone Number _____

Applicant Email address _____

Is Applicant the Property Owner? Yes ____ No ____ If no, enter Owner's information below:

Property Owner & Phone Number _____

Property Owner Address _____

Linear Frontage of Building Facing Principal Street _____ Sign District SD _____

Sign Type (Check one only): Freestanding ____ Hanging ____ Wall ____ Window ____ Awning/Canopy ____
Directional ____ Temporary ____

Sign Design: All applications must be electronically submitted along with 8 hard copies: Applications must include a detailed drawing showing all sign dimensions, graphic design, (including lettering and pictorial matter), visual message (text, copy or content of sign), ****Sign colors: must submit actual color samples with this application (1 for each application copy)**, lighting and landscaping (if proposed)

Location: All applications must be accompanied by a site plan, drawn to scale, showing the following: for freestanding signs, the position of the sign in relation to adjacent buildings, structures, roads, driveways, property lines, other signage, light fixtures, walls and fences. For awnings/canopy, total window area of principal façade, or linear frontage of building (as appropriate), proposed sign locations in relation to adjacent signs and light fixtures.

Sign Specifications
PRIMARY SIGN

Size of Sign (using fee, not inches): Height ____ Width ____ Total Sq. Ft. ____

Number of Sign Faces: (Check only one) Single ____ Double ____

Material: Wood ____ Metal ____ Other Durable Material ____ Specify _____

Lighting: Yes ____ No ____ If yes, specify type and provide documentation with this application.

DIRECTIONAL SIGN

Size of Sign (Limited to Two Feet) ____ (Size of sign will be measured in accordance with Section 171-42H of the Village Code)

Material: Wood ____ Metal ____ Other Durable Material ____ Specify _____

Lighting: Yes ____ No ____ If yes, specify type and provide documentation with this application. The undersigned respectfully petitions the Village of Fishkill Planning Board for a Sign Permit. Application is being made in accordance with the Village of Fishkill Zoning Code. The undersigned acknowledges that the Building Department must refer this application to the Planning Board. Such referral will take place within five (5) days of receipt of a completed application, and in order to be considered for the next available meeting agenda of the Planning Board, a completed application must be **received at least ten (10) business days before such Planning Board meeting**. In order to be considered complete, this application form, and all required items and fees must be received by the Building Department. Applicant certifies that liability insurance will be carried (copy of which will be attached to permit) covering both the erecting of the sign and the maintenance of the sign. It is understood if there are ANY omissions in this application, or attachments, it will be denied by the Building Department or by the Planning Board. In addition, if there are any violations on the property, the application will be denied.

APPLICANT NAME (PLEASE PRINT)

APPLICANT SIGNATURE

DATE

PROPERTY OWNER SIGNATURE (if different from applicant)

SIGN INFORMATION

Site location _____ Sign District SD _____

Sign Contractor _____ Phone # _____

Sign Contractor
Address

Sign Fees: Single Sided \$150 Double Faced \$250

Verbiage change only (No dimensional alterations) Single Sided \$150 Double Faced \$250

In addition to sign fees and escrow of \$400 is required at time of submission.

Retroactive sign permit fee \$100 in addition to other fees (for work commenced or completed prior to application/approval for a sign permit this will be in addition to above fees)

I hereby agree to hold the Village of Fishkill harmless from any claims arising from the proposed activity. I hereby acknowledge that I may be required to establish an escrow account in anticipation of any and all charges associated with the review of this application by any Village of Fishkill consultants i.e. Village Planner, Attorney, and/or Engineer

Applicant Signature

Date

THIS SECTION TO BE COMPLETED BY THE PLANNING AND ZONING DEPARTMENT

Sign permit referred to Planning Board:

Yes ____ No ____ Date Referred _____

Comments:

Sign Permit Granted:

Yes ____ No ____ Date Granted _____

If No, was application referred to Zoning Board of Appeals?

Yes ____ No ____ Date referred _____

Approved by ZBA:

Yes ____ No ____ Date of ZBA Hearing _____

Comments:

Proposed Completion Date (if approved) _____

Application Note:

AS PER THE VILLAGE PLANNING BOARD

**ALL ITEMS REQUIRED FOR THE SIGN PERMIT PROCESS MUST
BE INCLUDED OR THE APPLICATION WILL BE DENIED
(NO EXCEPTIONS)**

**DIRECT QUESTIONS
TO THE VILLAGE BUILDING DEPARTMENT
845-897-4430**