



SIGN PERMIT APPLICATION

VILLAGE OF ISLANDIA

1100 Old Nichols Road
Islandia, New York 11749
631-348-1133 FAX 631-348-7650

PROPERTY ADDRESS

PROPERTY OWNER

EMAIL

Phone _____ Cell _____

Contact Person & Phone: _____

CONTRACTOR NAME

BUSINESS NAME

Town or County License # _____

ADDRESS

Phone _____ Fax _____

Cell _____

EMAIL _____

TENANT NAME _____

MAILING ADDRESS (if Different)

Phone _____ Fax _____

Other Contact & Phone _____

EMAIL _____

Are there any Property Covenants or Conditions which would affect the installation of sign? () Yes () No If yes, please attach.

AFFIDAVIT

I swear to the best of my knowledge and belief the statements contained in this application are a true and complete statement of all proposed work on the described premises and that such work is authorized by the Property Owner.

Sworn to before me this _____ day of _____ 20____

Owner or Lessee Signature

FOR OFFICE USE ONLY

TAX MAP # _____

ZONE _____

TOTAL SQ FT of SIGN _____

FEES _____

TOTAL FEES _____

PERMIT # _____

DATE ISSUED: _____

Approved by: _____

NOTE: This permit is subject to revocation at any time if sign is not as approved or becomes unsafe

FILING FEE WITH APPLICATION: \$400

Additional fee on approval @ \$5.00 per sq ft

SIZE & TYPE OF SIGN

FACIAL

** Is Sign Electrical? () Yes () No

Width of Store/Building Front _____

Distance Sign Projects From Bldg _____

Height of Sign from Grade to Top of Sign _____

Size of Sign () H x () W = _____ Sq Ft

Sign Wording: _____

GROUND SIGN

** Is Sign Electrical? () Yes () No

Width of Property Front _____

Height of Sign from Grade to Top of Sign _____

Sign Setback from Property Line _____

Setback of Side of Bldg _____

Size of Sign () H x () W = _____ Sq Ft

Sign Wording: _____

OTHER (Please describe in detail)

NOTE: **Electrical Signs Require Final Inspection Approval Certificate

Notary Signature