

### SIGN APPLICATION

Village of Granville  
Quaker Street  
Granville, New York 12832  
518-642-2640

File No. _____
Applicant Name: _____
Applicant Address: _____
_____
Date Received: _____
Date of Final Decision: _____
Final Decision: _____

Planning Board meetings are held on the third Monday of each month at 7:30 p.m.

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**Instructions:**

The following Sign Application must be submitted and deemed complete for review by the Code Enforcement Officer or the Village Clerk at least ten (10) working days prior to the next scheduled Planning Board meeting. The fee is \$75.

Please submit seven (5) copies of the following application package.

Next available meeting date: \_\_\_\_\_

Deadline for application: \_\_\_\_\_

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**Part I: General Information**

- Applicant's Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
- Agent's Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
- Property Owner's Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone No. \_\_\_\_\_
- Tax Map Number: Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_



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**Part II: Sign Data**

Please complete the following sign data requirements. (Please refer to Granville Zoning Law for sign requirements.)

<b>Sign Data</b>			
Type of Sign	Dimensions (L x W x H)	Height to top of Sign	Illuminated
Temporary			
Projecting			
Freestanding			
Marquee, et all.			
Iconic			
Roof			
Other			

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**Part III: Signatures**

*Signature of Owner:*

The information provided in this application is true and accurate to the best of my knowledge. I acknowledge that the Planning Board will not review my plan unless all information requested has been submitted.

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

\_\_\_\_\_  
Date

*Authorization to Act as Agent For:*

In the event that the Owner of the property desires to have another individual act as his/her authorized representative in support of this application the following statement must be completed and signed:

I, \_\_\_\_\_, owner of the premises located  
(Name of Owner)

at \_\_\_\_\_ With the Tax Map No. \_\_\_\_\_,  
(Location)

hereby designate \_\_\_\_\_ as my agent regarding a  
(Agent)

Sign Application.

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

\_\_\_\_\_  
Date

**Part IV: Decision of the Planning Board**

Permit Granted

Condition(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Permit Denied

Condition(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Chairperson  
Planning Board

\_\_\_\_\_  
Date

\_\_\_\_\_

<b>Record of Vote</b>		<b>Date:</b> _____	
	<b>Member Name</b>	<b>Aye</b>	<b>Nay</b>
Chair	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____
Member	_____	_____	_____

\_\_\_\_\_