VILLAGE OF ROCKVILLE CENTRE

P.O. BOX 950 ROCKVILLE CENTRE, NY 11571 Tel .# (516) 678-9247 Fax # (516) 678-4544 SIGN PERMIT APPLICATION

PERMIT NO.	Exp
DATE OF	
APPLICATION _	

- All applications for permits shall be accompanied by plans and specifications of the existing or proposed sign, showing dimensions, materials and details of construction and affixation, a <u>sketch</u> thereof and such other information and data as may be required by the Superintendent of Safety Inspection.
- 2. Sign erector is required to provide Certificate of Insurance, Bodily Injury, and Property Damage, in amount of \$1,000,000, naming Village as <u>Additional Named Insured</u>.
- 3. Make a check or money order (no cash) for payment of sign fee payable to the Village of Rockville Centre. **FEE MUST ACCOMPANY THIS APPLICATION**.
- 4. A Sign Permit number **DECAL** will be supplied by the Village and **SHALL** be applied to the lower left hand face of the Sign, by the sign erector.

Please Print:						
Location of Premises			Section	Block	Lot	
Name of Occupant			_ Trading as:			
Owner of Premises						
Address of Owner		City	State		Zip Code	
Sign Erector		- 5				
Address Street		City	State		_ Zip Code	
Type of Sign Free Standing	Wall	Η	Roof	Gro	bund	
LOCATION of free standing or ground sign on plot (property survey required). ROOF SIGN: Require certification by a licensed engineer or registered architect.						
SIZE OF SIGN: height	length		area of sign		sq. ft	
Size of available wall on which sign is to be placed: height length						
Material	Color 1	2	3 _		4	
Will sign be illuminated? Yes No How?						
If yes, name of Rockville Centre	e licensed electrician a	and license nun	ber			

COMPLETE VERICATION ON REVERSE SIDE OF THIS COPY

VERIFICATION

STATE OF NEW YORK COUNTY OF NASSAU, VILLAGE OF ROCKVIILE CENTRE

being duly sworn, deposes and says			
That he / she resides at			
; that he / she is the owner of the property heretofore described and forth in this application, that the we is to be done on the premises in accordance with the application for a sign permit and the plans of such proposed work, is de authorized by me or it.			
	Owner of Property		
Sworn to me before this			
day of			
Notary Public, Nassau County, NY			
I / we, the applicant (s)	Print Name		
with respect to signs, their locations, and the installation the	(Signed)		
FOR OFF	ICE USE ONLY		
Application inspected by: Disposition	Date		
VILLAGE OF ROCKVILLE CENTRE DEPARTMENT OF SAFETY INSPECTION SIGN PERMIT			
No:	Permission is required by the Sign Ordinance to perform the work as described in the within		
Date:	statement and the attached plan or sketch, which are made a part thereof, is hereby granted.		
Expires:	Approved		
	(Authorized Signature)		

(Authorized Signature)