

PLANNING DEPARTMENT
P.O. Box 470
1142 Route 311
Patterson, NY 12563

Michelle Lailer
Sarah Mayes
Secretary

Richard Williams
Town Planner

Telephone (845) 878-6500
FAX (845) 878-2019



**TOWN OF PATTERSON
PLANNING & ZONING OFFICE**

ZONING BOARD OF APPEALS
Lars Olenius, Chairman
Howard Buzzutto, Vice Chairman
Mary Bodor
Marianne Burdick
Gerald Herbst

PLANNING BOARD
Shawn Rogan, Chairman
Charles Cook, Vice Chairman
Michael Montesano
Thomas E. McNulty
Ron Taylor

Instructions to Applicants for Sign Application

- 1. Read Sign Regulations Attached**
- 2. Complete Sign Application in full**
- 3. Submit (9) Nine copies of completed Sign Application**
- 4. Submit (9) Nine copies of Sign details such as pictures, sketch, etc**
- 5. If sign is affixed to building, a plan showing location of sign on building (9) Nine copies**
- 6. If sign is free-standing or temporary, a survey of the property showing location of the sign (9) Nine copies**
- 7. An application fee of \$75.00, Checks are payable to the Town of Patterson**

PLANNING DEPARTMENT

P.O. Box 470
1142 Route 311
Patterson, NY 12563

Michelle Russo
Sarah Wagar
Secretary

Richard Williams
Town Planner

Telephone (845) 878-6500
FAX (845) 878-2019



**TOWN OF PATTERSON
PLANNING & ZONING OFFICE**

ZONING BOARD OF APPEALS

Lars Olenius, Chairman
Howard Buzzutto, Vice Chairman
Mary Bodor
Marianne Burdick
Gerald Herbst

PLANNING BOARD

Shawn Rogan, Chairman
Charles Cook, Vice Chairman
Michael Montesano
Thomas E. McNulty
Ron Taylor

SIGN APPLICATION

BUSINESS NAME: _____

TAX MAP #: _____

BUSINESS ADDRESS: _____ **ZONING DISTRICT:** _____

APPLICANT NAME: _____ **TELEPHONE #:** _____

ADDRESS: _____

PROPERTY OWNER (If different from Applicant): _____

PROPERTY OWNER ADDRESS: _____

Use Conducted on Premises for Proposed Sign: _____

Number of Signs: _____ (A separate sign application must be completed for each proposed sign)

Sign Reads As Follows: (A picture or sketch must be submitted with application):

Size of Sign: _____ Feet long x _____ Feet high = _____ Square feet **Total length of Building:** _____

Free-standing Fixed to Building Permanent Temporary

Method of Support: _____

Type of Sign: Board Box Channel Contour Other

Size of Letters: _____ **Letter Type:** _____ **Color of Letters:** _____

Background Color: _____ **Lighting:** Yes No _____

If yes to lighting, type of lighting: _____

Applicant Signature: _____ **Date:** _____

(If not the owner of the property you must complete Page 2 of this Application)

Authorization for Filing Application

This section must be executed if anyone other than the owner is making application.

_____ is hereby authorized to make the within sign application.

Property Owner's Name _____

Property Owner's Signature _____ **Date:** _____