

Project #:

## SIGN

Instructions, Checklist & Application

A Sign application is typically required for a new sign or change/replacement of an existing sign. The below checklist, and all attachments and listed documents, must be submitted for an application to be considered for placement on a Planning Board agenda. <u>Please initial each item submitted and sign below</u>.

Required Submittals for an application to be considered COMPLETE and ready for placement on an Agenda:

- Completed Sign Application (attached) = <u>1 copy</u>
- \_\_\_\_\_ "Owner Authorization" (if necessary; attached). This form must be submitted if the Applicant is not the Owner of the building/property. <u>1 copy with original signature</u>
- \_\_\_\_\_ Ethics Disclosure Form (attached) = <u>1 copy</u>
- \_\_\_\_\_ Narrative: A summary of the request; describe dimensions, height, and lighting (if any). (<u>3 copies)</u>
- 8" x 10" or 11" x 17" <u>color rendering/image</u> of the proposed sign(s) (15 copies of each sign)
- \_\_\_\_\_ Plan showing the location of the proposed sign and property boundaries/right-of-way (3 copies)
- \_\_\_\_\_\_\$100 Application Fee for the 1<sup>st</sup> sign; \$50 each for each additional; made payable to: "Town of Halfmoon"
- Additional Important Information:
- **Illumination/LED:** LED sign illumination is subject to the discretion of the Planning Board; contact the Planning Department with any questions regarding restrictions and/or limitations of LED lighting.
- **Two-Sided Signs:** The square footage of only one side of a two-sided sign is used in calculations.
- \_\_\_\_\_ Location: Signs must NOT be placed in the Right of Way and minimum 50 ft. from a residential district.
- Incomplete applications will not be accepted. Complete applications will be placed on the agenda at the discretion of the Planning Board Chair. You will be notified by email when you are on an agenda.
- **Building Permit:** Most signs require a Building Permit. If approved by the Board, you must contact this office to determine these requirements and complete a Building permit application.

I have read the above instructions and checklist and fully understand the re I also understand that if approved by the Planning Board, a separate Buildi	
Applicant (Please Print):	
Applicant Signature:	Date:



Sign Application

Project #:\_

## I. PROJECT INFORMATION:

Project Address:         Applicant Name:       Date of Birth or Employer ID# (EIN):         Address:	Project Name:			
Address:	Project Address:			
Telephone #:	Applicant Name:	Date of Birth or Employer ID# (EIN):		
Property Owner (If different than Applicant AND the Owner does not sign below, please submit an original, notarized "Owner Authorization" form - attached):         Name:       Date of Birth or Employer ID# (EIN):         If a corporation, please name a responsible party/designated officer:       Address:         Telephone #!       Fax #:       Email:         Name of Sign Company & Contact Name:       Email:       Image: Sign Sign Sign Sign Sign Sign Sign Sign	Address:			
Internate d''Owner Authorization" form - attached):         Date of Birth or Employer ID# (EIN):         If a corporation, please name a responsible party/designated officer:       Address:         Telephone #:       Fax #:       Email:         Name of Sign Company & Contact Name:	Telephone #:	Fax #:	Email:	
Name:       Date of Birth or Employer ID# (EIN):         If a corporation, please name a responsible party/designated officer:				riginal,
If a corporation, please name a responsible party/designated officer:   Address:   Telephone #:   Fax #:   Email:     Name of Sign Company & Contact Name:   Telephone #:   Fax #:   Email:     Name of Sign Company & Contact Name:        Telephone #:   Fax #:   Email:     Name of Sign Company & Contact Name:        Telephone #:   Fax #:   Email:        Sign No   New Sign(s) will be (check all that apply):   Peplacement of existing sign/panel   New Sign(s) will be (check all that apply):   Replacement of existing sign/panel   New Sign(s) will be (check all that apply):   Replacement of existing sign/panel   New Sign(s) will be (check all that apply):   Replacement of existing sign/panel   New Sign(s) will be (check all that apply):   Replacement of existing sign/panel   New Sign(s) will be (check all that apply):   Replacement of existing sign/panel   New Sign(s) will be (check all that apply):   New Sign(s) will be (check all that apply):   Pimension:   X   (H)   (W)   (W)   (Total)   Illumination:   Internal   Flood   Dimension:   X   (H)   (W)   (H)   (W)   (H) <td>Name:</td> <td>wher Authorization" form -</td> <td> Date of Birth or Employer ID# (EIN):_</td> <td></td>	Name:	wher Authorization" form -	Date of Birth or Employer ID# (EIN):_	
Telephone #:       Fax #:       Email:         Name of Sign Company & Contact Name:				
Name of Sign Company & Contact Name:         Telephone #:       Fax #:       Email:         II. SIGN INFORMATION: Number of: Proposed New Signs:       Total # if approved:         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         Sign #1       Sign #2       Dimension:       (M)       X       =       SF         Dimension:       (H)       X       =       SF       Sign #4       Dimension:       (Total)       (H)       (W)       (Total)       Illumination:       Internal       Flood       Other	Address:			
Telephone #:       Fax #:       Email:         II. SIGN INFORMATION: Number of: Proposed New Signs:       Existing Signs:       Total # if approved:         New Sign(s) will be (check all that apply):       Replacement of existing sign/panel       New Sign         IVEW Wall-Mounted (One-Sided):       Bign #2       Free-standing/Monument         Sign #1       Sign #2       Immension:       X	Telephone #:	Fax #:	Email:	
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EXISTING Signs to Remain (if applicable)?:   If "yes", total number of existing signs to remain:   Applicant/Owner Signature:   Date:   (For Department Use Only):   Planning Board Action:   Approved Disapproved Date of Approval/Disapproval:				
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Applicant/Owner Signature:	EXISTING Signs to Remain (if	applicable)?: Yes signs to remain:	] No Total SE of existing signs to remain:	SE
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	(For Department Use Only) :			
Chair Signature: Date:	Planning Board Action: Approved [	] Disapproved 🗌 Date of Ap	proval/Disapproval:	
	Chair Signature:		Date:	



Town of Halfmoon 2 Halfmoon Town Plaza Halfmoon, NY 12065 371-7410 ext. 2267 Fax: 371-0304 Planning Department

## **OWNER AUTHORIZATION - SIGN APPLICATION**

STATE OF NEW YORK ) COUNTY OF SARATOGA )SS.

On this ......day of ......,Two Thousand and ....., before me, the subscriber, personally appeared ....... to me personally known and known to me to be the same person described in and who executed the within Instrument, and ......he......acknowledged to me that ......he.....executed the same.

Owner

Notary Public

## **Town of Halfmoon**

Applicant Ethics Disclosure Form

(General Municipal Law Section 809)

Any person who submits an application, petition, bid or request to the Town of Halfmoon must fill out this form and submit to the Town with the application being filed. Please answer all questions.

Name of Applicant, Petitioner, or Bidder: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Application, Petition, or Bid: \_\_\_\_\_

- 1. Is there any Town officer or employee who <u>both</u>:
  - a. Is required, individually or in a group, to take any kind of action (other than a ministerial act\*) on your application: <u>and</u>
  - b. Has an interest\*\* in your application? If so, list the Town employee's or officer's name(s):

2. If you filled in any names for question 2 above, please fully describe in what way and to what extent each Town employee you named "has an interest":

Signed:

Dated: \_\_\_\_\_

\* "Ministerial Act" means an action performed in a prescribed manner imposed by law without the exercise of judgement or discretion as to the propriety of the action.

\*\* "Has an Interest" means that the Town employee or officer or his/her spouse, or their brothers, sisters, parents, children, grandchildren, or the spouse of any of them (a) is the applicant, or (b) is an officer, director, partner or employee of the applicant, or (c) legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association applicant, or (d) is a party to an agreement with such an applicant, express of implied, whereby he may receive any payment or other benefit, whether or not for services rendered, dependent or contingent upon the favorable the favorable approval of such application, petition, bid or request.