

APPLICATION FOR SIGN PERMIT

APPLICATION IS F GREENPORT.	HEREBY MADE FOR THE ISS	UE OF A SIGN PERMIT PURSUANT TO THE CODE OF THE VILLAGE OF	
Applicant	NAME:IF A CORPORATION-NAME AND TITILE OF OFFICER:		
	ADDRESS:		
		PHONE:	
		DATE:, AGENT, ARCHITECT, ENGINEER, BUILDER, GENERAL CONTRACTOR, HER.	
	EMAIL ADDRESS:		
Owner	NAME:		
	ADDRESS:		
PH			
Location of site	тах мар 1001	1 SECTION: BLOCK: LOT:	
	STREET ADDRESS:		
	EXISTIING ZONE:		
	LOCATED IN HISTORIC D	ASSOCIATED WITH SITE PLAN ASSOCIATED WITH ZBA REVIEW OR USE EVALUATION APPEAL	
Workers' Compensation Insurance for installation if required. PRIOR TO COMMENCING BUILDING WORK, EVIDENCE OF INSURANCE IS REQUIRED:			
	NAME OF INSURANCE CARRIER:		
	POLICY NO:	EXPIRATION DATE:	
Please provide scale drawings indicating the following:			
 SIZES OF ALL PROPOSED SIGNS FONT SIZE AND STYLE PROPOSED COLORS LOCATION ON BUILDING (PHOTOS MAY BE USED) PROPOSED MATERIALS USED FOR SIGNS 			
Fee	\$	FEE TO BE PAID UPON FILING THIS APPLICATION Form SPA1	