

**TOWN OF MORRISTOWN
SIGN PERMIT APPLICATION**

Date Submitted: _____ Tax Map #: _____ Permit number: _____
Date Approved: _____ Zoning District: _____ Date Permit Paid: _____
Date Denied: _____ ZBA or PB Approval: _____ Bldg Permit Fee: _____

ADDRESS OF THE PROPERTY: _____

1)Applicant: Name: _____ Phone #: _____

Address: _____

E-mail Address: _____

2)Property Owner (only use if different than applicant)

Owner: Name: _____ Phone #: _____

Address: _____

DIRECTION FOR COMPLETEING THIS APPLICATION:

1.Deliver or mail this completed application fee to:

Town of Morristown Codes Department
604 Main St./PO Box 240
Morristown, NY 13664

2.Please sign the application in front of a Notary Public. Notary Public is available at the Town of Morristown Offices for your convenience.

3.<<<Check what sign you are applying for>>>

___ Freestanding Sign

___ Building Sign

___ Temporary Sign (Limited to 14 Days in a Calendar Year)

Date That Temporary Sign will be up: _____

Application IS HEREBY MADE TO PLACE A SIGN

4.Location to property lines (if Pylon or Monument Sign) _____

5.Material: _____

6.Sign Size: _____ Sign Height (if Freestanding): _____

Illuminated Yes: ___ No: ___ Other Pertinent Data: _____

7.Length of building along road frontage: _____

8.Square footage of sign requested: _____

APPLICATION FOR A SIGN PERMIT

9. List of other signs on property: _____

10. Location of Property: _____

11. Any existing variances for property: _____

12. Attach a drawing or picture of the sign to the application.

IF APPLICATION IS NOT FULLY COMPLETED, NO PERMIT WILL BE ISSUED

STATE OF NEW YORK)

SS:

COUNTY OF ST. LAWRENCE)

Deponent, being duly sworn, says that he (she) is the owner or authorized agent for which the foregoing work is proposed to be done, and that he (she) is duly authorized to perform such work, and that all workmen employed on this building are covered by contract or compensation insurance, and that all work will be performed in accordance with all existing State Laws and Local Ordinances. I further state that all information is true and correct to the best of my knowledge.

Signature of Applicant

Print Name

Sworn to this _____ day of _____, _____

Notary Public

.....
FOR USE BY THE CODE ENFORCEMENT OFFICER ONLY:

() Approved

() Denied – Not in conformance with the following provision(s) of the Town of Morristown Zoning Ordinance:

Other Comments: _____

Date: _____ By: _____

