

FOR OFFICE USE ONLY

**VILLAGE OF MALONE**  
**SIGN PERMIT APPLICATION**

343 W MAIN STREET  
MALONE NY 12953  
518-483-4570 (OFFICE)  
518-481-6737 (FAX)  
[code@villageofmalone-ny.com](mailto:code@villageofmalone-ny.com)

Tax Map ID #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Application # \_\_\_\_\_ Permit #: \_\_\_\_\_

Invoice # \_\_\_\_\_ Payment Method \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_ Date Paid \_\_\_\_/\_\_\_\_/\_\_\_\_

RECEIVED BY \_\_\_\_\_

NAME OF APPLICANT:

NAME OF BUSINESS:

BUSINESS ADDRESS:

PHONE #:

**ALL STREET RIGHT-OF-WAYS MUST BE COMPLIED WITH AS WELL AS ALL FILLING AND GRADING REGULATIONS**

**SIGN INFORMATION**

LOCATION OF BUILDING, STRUCTURE OR LOT  
WHERE SIGN WILL BE ERECTED:

POSITION OF SIGN:

(IN RELATION TO NEARBY BUILDINGS OR STRUCTURES)

SIZE OF SIGN:

HEIGHT ABOVE SIDEWALK OR PUBLIC THROUGHFARE: \_\_\_\_\_

SET BACK DISTANCE FROM SIDEWALK, CURB OR CURBLINE: \_\_\_\_\_

NAME OF PERSON OR FIRM ERECTING SIGN:

INSURANCE FROM PERSON OR FIRM ERECTING SIGN: \_\_\_\_\_

COST OF SIGN (INCLUDING ERECTION OF SIGN): \$ \_\_\_\_\_

**CATEGORIES    FEATURES**

BANNER SIGN _____	DIRECTIONAL SIGN _____	TRANSLUCENT _____	ILLUMINATED _____
SYMBOL SIGN _____	DOUBLE-FACED SIGN _____	NON-ILLUMENATED _____	IDENTIFYING _____
MARQUE SIGN _____	POLE OR PYLON SIGN _____	NON-ACCESSORY _____	TEMPORARY _____
WALL SIGN _____	INTERIOR WINDOW SIGN _____	ANIMATED/FLASHING ACCESSORY _____	

LOCATION OF NEAREST SIGNS:

AS OWNER OF BUILDING (OR REPRESENTATIVE OF), STRUCTURE OR LAND TO WHICH THIS PERMIT APPLIES I/WE AGREE TO SAVE THE VILLAGE OF MALONE HARMLESS FROM ANY AND ALL DAMAGES, JUDGEMENTS, COSTS OR EXPENCES WHICH THE SAID VILLAGE MAY INCUR OR SUFFER BY REASON FOR THE GRANTING OF THIS PERMIT. LIABILITY POLICY OR BOND IS REQUIRED AS SEPARATE COVERAGE AND MUST CONTAIN COVERAGE UNDER THE INSURANCE LISTED ABOVE.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND I WILL ADHERE TO ALL PHASES OF THE NEW YORK STATE BUILDING CONSTRUCTION CODE, ZONING AND SIGN ORDINANCES OF THE VILLAGE OF MALONE, NEW YORK.

\_\_\_\_\_  
SIGNATURE OF OWNER OR HIS/HER REPRESENTATIVE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
BUILDING INSPECTOR

\_\_\_\_\_  
DATE APPROVED

\_\_\_\_\_  
VILLAGE CLERK DATE RECEIVED

AT A MEETING OF THE BOARD OF TRUSTEES OF THE VILLAGE OF MALONE HELD \_\_\_\_\_ THIS APPLICATION FOR A SIGN PERMIT WAS ACCEPTED SUBJECT TO THE PROVISIONS OF THE VILLAGE OF MALONE.

\_\_\_\_\_  
VILLAGE CLERK DATE APPROVED

THE BOTTOM OF THIS SHEET IS TO BE USED FOR SKETCH SHOWING SIZE, LETTERING AND PICTORAL MATTER REGARDING THIS SIGN. PLEASE PROVIDE ADDITIONAL SHEETS, IF NECESSARY.