



TOWN OF STILLWATER

BUILDING, PLANNING & DEVELOPMENT DEPARTMENT
881 HUDSON AVE, STILLWATER, NY 12170
(518) 664-6148, EXT. 215

**Application for
Signage
Fee: \$100.00**

OFFICE USE ONLY

Project # _____

\$100.00 Fee Paid

Rec'd by: _____ / / 2020

PROJECT INFORMATION

Project Name:

Address/Location:

APPLICANT/REPRESENTATIVE INFORMATION

Name:

Phone:

Email:

Address:

City:

State:

Zip:

Owner (if different from applicant):

Phone:

Email:

Address:

City:

State:

Zip:

SITE INFORMATION

Parcel Identification (SBL) # of all lots included:

Number of new lots proposed:

Zoning District:

Primary Road Frontage Speed limit: _____ MPH

Number of signs proposed: _____ (additional sheets may be submitted)

SIGNATURES

I, the undersigned, have thoroughly read and understand the application and the list of items to be shown on the plans and documents for review and I consent to all the requirements as set forth in the application.

Signature

Date

AUTHORIZATION TO ACT AS AGENT

In the event that the owner of the property desires to have another individual act as his/her authorized representative in support of this application the following statement must be completed and signed:

I, _____, owner of the above referenced lot(s) hereby designates _____ as my agent regarding this application for review. Signature: _____

PROJECT INFORMATION

Sign will be (check all that apply): Replacement of existing sign/panel New Sign
 Wall/Awning/Roof Sign Free-standing

Wall-Mounted (One-Sided):

Sign #1

Dimension: ____ X ____ = ____ (SF)
 (H) (W) (Total)

Illumination: Internal Flood Other _____

Sign #2

Dimension: ____ X ____ = ____ (SF)
 (H) (W) (Total)

Illumination: Internal Flood Other _____

Sign #3

Dimension: ____ X ____ = ____ (SF)
 (H) (W) (Total)

Illumination: Internal Flood Other _____

Monument or Free-standing:

Dimension: ____ X ____ = ____ (SF) Illumination: Internal Flood None
Other _____

(H) (W) (Total)

Number of sides: One-sided Two-sided

Total Height: _____ ft _____ in

Do other signs exist on property? Yes No

If yes, please supply the number and total square footage of all other signage:

Dimension: ____ X ____ = ____ (SF) Illumination: Internal Flood Other

APPLICATION PREPARATION CHECKLIST

Applications must be submitted along with the Application Fee and deemed complete by the department to be considered for placement on an agenda. Incomplete applications will not be accepted and will be returned to the applicant. Exclusion of any required materials will result in the delay of project review.

Fifteen (15) printed (and 1 digital) copies of the following materials:

The following materials are required:	Applicant Initials
Application form	
Maps***Printed maps must be folded Size of 22x34 inch maximum should be used when practical See Map Preparation Instructions below	
Digital Copies***Must be on CD, Jump Drive, or downloadable email format DIGITAL COPIES OF ALL MATERIALS ARE MANDATORY. ANY APPLICATION SUBMITTED WITHOUT DIGITAL COPIES OF ALL MATERIALS WILL BE DEEMED INCOMPLETE	

OFFICE USE ONLY	
Public Notice Fee The cost of this fee will be determined by the Planning Board based on the number of notifications required and must be submitted no later than 14 days prior to the meeting	
Engineering and legal escrow fees To be determined following initial review of the application. This fee must be paid prior to placement on an agenda	
Additional copies of any and all materials submitted for SEQRA or other purposes	

MAP PREPARATION INSTRUCTIONS

MAP MUST INCLUDE:	Applicant initials	Internal
Site plan showing proposed location of new sign		
All existing and proposed boundary lines		
All existing and proposed easements and Rights of Way		
All existing structures		
Existing Zoning Districts and boundaries		
Street names for any existing or proposed roadways		
North arrow and site location map		
Standard notes as detailed below		
Approval Block as shown below		

****Standard Notes:** The following notes are the minimum requirement on all plats. Additional notes may be necessary as defined in the Town Subdivision Design Standards, Section 1.12 or as requested by the Planning Board.

1. This property may border a farm, as defined in the Town of Stillwater Local Law #1 of the year 1997. Residents should be aware that farmers have the right to undertake farm practices which may generate dust, odor, smoke, noise and vibration.
2. This proposal includes a total of **[insert parcel area]** ± acres and lies within the Town of Stillwater **[insert zoning district]** zoning district.
 Min lot size: _____ sf
 Min lot width @ bldg line: _____ ft
 Setbacks:
 Front: _____ ft
 Side: _____ ft
 Rear: _____ ft
3. Parcel is identified as tax parcel **[insert tax ID number]**, Town of Stillwater, Saratoga County, New York.
4. The average lot size is **[insert size]** sq. ft.
5. Describe any easements or other restrictions on this property

*****Town of Stillwater Approval Block:**

TOWN OF STILLWATER PLANNING BOARD APPROVAL
 APPROVED BY RESOLUTION OF THE PLANNING BOARD OF THE TOWN OF STILLWATER, NEW YORK, ON THE _____ DAY OF _____, 20____ SUBJECT TO ALL REQUIREMENTS AND CONDITIONS OF SAID RESOLUTION. ANY CHANGES, ERASURES, MODIFICATIONS OR REVISIONS OF THIS PLAT, AS APPROVED, SHALL VOID THIS APPROVAL SIGNED THE _____ DAY OF _____, 20____ BY _____
 PLANNING BOARD CHAIRMAN