



VILLAGE OF WAPPINGERS FALLS
 Office of Building, Planning & Zoning
 Office of Code Enforcement / Office of the Fire Inspector
 2582 South Avenue, Wappingers Falls, NY 12590
 Phone: (845)297-5277 fax: (845)296-0379
 E-Mail: bmurphy@wappingersfallsny.gov
www.wappingersfallsny.gov

APPLICATION FOR TEMPORARY SIGN PERMIT

DATE: _____

Name of Business: _____

Property Address: _____ Zoning District: _____

Name of Applicant: _____ Phone: _____

Address: _____

Is the applicant the property owner? YES NO If not, Please submit a consent form signed by the property owner.

SIGN DESCRIPTION

Type of Sign: Banner Sidewalk Yard Signs Other _____

Sign Dimensions: Height _____ Width: _____ Total: _____

Date of Sign Installation: _____ Date of Sign Removal: _____

Require Submittals

- Provide a sketch and location of proposed sign.
- Provide a consent form signed by the property owner.
- Applicant must carry all liability insurance covering both maintenance and installation of sign.
- The fee for temporary sign application is \$25.00 (check or cash only)

Conditions of Temporary Sign Permits

- Signs may not pose a safety hazard and/or block any right of way which includes vehicular and/or pedestrian sidewalks.
- Also be advised that this permit is being issued for a **period not to exceed 14 days from date of installation.**
- Extensions may be granted under the discretion of the Code Enforcement Officer for an additional 14 days.
- No establishment may be granted a permit for a temporary sign **within 90 days of the expiration** of the establishment's previous permit for a temporary sign.
- Temporary signs displayed on private property are limited to **ONE such sign** per establishment. Signs shall **not exceed 16 square feet in area** in business or industrial districts or **eight squares in area** in residential districts

Signature (Original Signature Required)

Date

ZONING DEPARTMENT USE ONLY

[] Fee Amount: _____ Receipt #: _____ Date Paid: _____ Check # _____ Cash _____

Approved Date: _____

Code Enforcement Officer/ Building Inspector:

Return this form in person to: **Office of Building, Zoning and Planning – 2582 South Avenue, Wappingers Falls, NY 12590**