



DEPARTMENT OF BUILDINGS & REGULATORY COMPLIANCE

200 HENRY JOHNSON BLVD.—SUITE 1 | ALBANY, NY 12210
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SIGN PERMIT APPLICATION

We encourage you to review the city sign ordinance, Chapter 375-4(I) of the City Code, which is available online, before submitting this application. There are several types of signs which do not require a permit, including non-illuminated signs less than 4 square feet affixed to a masonry surface of a building, directional and warning signs, some window signs, some temporary signs and banners, properly maintained and located A-frame signs less than 3 feet tall, and seasonal decorations and lighting. There are also a number of provisions that govern signs which depend on sign type and location and which are too complicated to set out in the instructions to this application. If a business is changing hands or if there has been a change of use at a property, a building permit application must also be submitted to ensure compliance with applicable zoning ordinances. A separate permit application must be made for each individual sign.

GENERAL INFORMATION

SITE ADDRESS: _____ ZIP: _____

OCCUPANT/OWNER: _____

EMAIL: _____ PHONE: _____

HOW WOULD YOU LIKE TO RECEIVE YOUR PERMIT (PLEASE CHOOSE ONE): A.) E-MAIL [] OR B.) MAIL []

CONTRACTOR: _____

ADDRESS: _____ ZIP: _____

EMAIL: _____ PHONE: _____

TOTAL COST OF WORK: \$ _____

SIGN INFORMATION

SIGN TYPE:

PLEASE INDICATE WHICH OF THESE DESCRIPTIONS APPLIES TO PROPOSED SIGN. FOR DEFINITIONS OF THESE SIGN TYPES PLEASE SEE THE ALBANY CITY CODE 375-6(B).

- WALL SIGN [] PROJECTING SIGN [] WINDOW SIGN [] AWNING GRAPHICS SIGN [] FREESTANDING SIGN []
PORTABLE OR SIDEWALK SIGN [] POLE SIGN [] POLE & PANEL SIGN [] MONUMENT SIGN []

SIGN LOCATION:

PLEASE INDICATE WHETHER THE SIGN WILL BE LOCATED ON OR OFF THE PREMISES WHERE WHAT IS ADVERTISED BY THE SIGN IS RENDERED. FOR A PRECISE DEFINITION "ON-PREMISES" VERSUS "OFF PREMISES, PLEASE REFER TO THE "DEFINITIONS" SECTION OF THE SIGN ORDINANCE.

- OFF PREMISES [] ON PREMISES []

IS THIS SIGN ADVERTISING A NEW BUSINESS OR A CHANGE OF USE AT THE PREMISES ADVERTISED BY THE SIGN?

YES [] NO [] IF YES, THEN A BUILDING PERMIT APPROVING THE CHANGE OF TENANT OR CHANGE OF USE AT THE PROPERTY WILL HAVE TO BE OBTAINED.

INSURANCE: HAVE YOU SUBMITTED PROOF OF THE NECESSARY INSURANCE TO BRC? YES [] NO []

WORKER'S COMPENSATION: HAVE YOU SUBMITTED PROOF OF WORKER'S COMP COVERAGE? YES [] NO []

APPLICATION FEE CALCULATION:

Table with 2 columns: SIGN FACE SQUARE FOOTAGE and APPLICATION FEE. Includes calculation: SQ/FT X \$1.25 = \$ and note: THE SIGN PERMIT APPLICATION FEE IS GREATER OF \$1.25 PER SQUARE FOOT OR \$25.

STAFF USE ONLY

APP. NO.: _____ APP. FEE: _____ REC'D BY: _____ PERMIT NO.: _____
DATE REC'D: _____ DATE ISSUED: _____ ASSIGNED TO: _____ ZONE: _____
CHECK NO.: _____ PARCEL NO.: _____ PLANS INCLUDED? YES / NO

PROJECT DESCRIPTION (PLEASE PROVIDE A DESCRIPTION OF HOW THE SIGN WILL BE SUPPORTED): _____

WILL THE SIGN BE BACKLIT? Yes No

WILL THE SIGN FEATURE CHANGEABLE TEXT? Yes No

DIAGRAM

ALBANY CITY CODE §307-15(C) REQUIRES THAT SIGN PERMIT APPLICATION BE ACCOMPANIED BY A DETAILED DRAWING OR BLUEPRINT SHOWING A DESCRIPTION OF THE CONSTRUCTION DETAILS OF THE SIGN AND SHOWING THE LETTERING AND/OR PICTORIAL MATTER COMPOSING THE SIGN; POSITION OF LIGHTING AND OTHER EXTRANEIOUS DEVICES; A LOCATION PLAN SHOWING THE POSITION OF THE SIGN ON ANY BUILDING OR LAND AND ITS POSITION IN RELATION TO NEARBY BUILDINGS OR STRUCTURES AND TO ANY PRIVATE OR PUBLIC STREET OR HIGHWAY, DRIVEWAY AND/OR SIDEWALK, THE MANNER IN WHICH THE SIGN IS TO BE MOUNTED, AND THE MATERIALS OF WHICH THE SIGN WILL BE COMPOSED. IF YOU CAN PROVIDE THIS IN THE SPACE BELOW, YOU MAY DO SO. YOU MAY ALSO SUBMIT THIS IN A SEPARATE DOCUMENT.

Certification: I hereby certify that I have examined this application and know the information contained therein to be correct. I understand that the granting of a permit does not grant authority to violate or ignore any law, that this permit authorizes only the work described herein and will expire, unless otherwise noted, in one year from the date of issuance.

Applicant: _____

Date: _____

STAFF USE ONLY

THE FOLLOWING CONDITIONS APPLY TO THIS APPROVAL:

APPROVED BY: _____

DATE: _____

APPROVED BY: _____

DATE: _____

ADMIN ID.: _____