

TOWN OF DICKINSON – SIGN PERMIT APPLICATION



Code Enforcement: 153 Old Front Street Binghamton, NY 13905 Phone: 607-723-9401 Email: kdoyle@townofdickinson.com

Permit Number _____

APPLICANT: _____ CONTACT PHONE # _____

ADDRESS: _____

LOCATION OF SIGN: _____

OF ILLUMINATED: _____ # OF NON-ILLUMINATED: _____

PURPOSE: Erect _____, Repair _____, Alter _____, Relocate _____, Maintain _____ at the above location.

Type	Number	Size	Area	Coverage	Height	Internal/External Lighting
Monument						
Pylon						
Wall						
Projecting						
Marquee						
Window						
Suspended						
Awning/Canopy						
Door						
Off-Premises						

SIGN SETBACKS: Front _____, Side _____, Rear _____

REQUIRED SUBMITTAL: DIAGRAM OF SIGN SHOWING MEASUREMENTS; PLOT PLAN OF PROPERTY INDICATING PROPOSED SETBACKS FOR PYLON/MONUMENT SIGN; OR PICTURE ELEVATION SHOW PROPOSED LOCATION ON BUILDING.

For Temporary Signs: List temporary signs that will be removed

Address	Date of Removal	Square Footage

NAME & ADDRESS OF CONTRACTOR: _____

NAME & ADDRESS OF BUILDING OWNER: _____

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AGREEMENT

I hereby make application for the erection, repair, alteration, relocation or maintenance of the above-described sign and further agree that the work will be done in accordance with the provisions of the Ordinances of the Town of Dickinson.

FEE: \$ _____

APPLICANT: _____

Owner, Contractor

DATE OF APPROVAL: _____

APPROVED: _____

Code Enforcement Officer