



Town of Alden
Building Department
 3311 Wende Road
 Alden, New York 14004
 (716) 937-6969 ext 4
 www.alden.erie.gov

SIGN PERMIT APPLICATION

Please attach rendering, elevation & plan drawings to scale (including landscaping)

Permit No.: _____

Erect a sign _____ **Alter a sign** _____ **Move a sign** _____

Sign Location: _____ **Zoning District:** _____

Owner of Premises: _____

Applicant Name: _____	Contractor Name: _____
Address: _____	Address: _____
City, State, Zip _____	City, State, Zip _____
Phone: _____	Phone: _____

Type of Sign: *(check all that apply)*

Canopy Sign _____

(attached to soffit or under fascia)

Changeable Letter Sign _____

(permanent structure; letters displays or illustrations changeable or temporary)

Fascia Sign _____

(attached flat against fascia)

Free Standing Sign _____

(monument/ground)

Temporary/Mobile Sign _____

(not permanently mounted)

Wall Sign _____

(projecting no more than 12")

Window Sign _____

(inside or facing outside to be seen from exterior)

Illuminated _____ **Electric** _____ **LED** _____ **Metal** _____ **Wood** _____

Sign Width: _____ **Sign Height:** _____

Sign Face Area: _____ sq. ft. **Total area of both sides:** _____ sq. ft.

Lower edge _____ feet above grade **Upper edge** _____ feet above grade

(2' minimum)

(8' maximum)

Sign extends _____ **feet above building**

Will sign obstruct any fire escape, window or door? Yes _____ No _____

Will Sign conform to all Town ordinances? Yes _____ No _____

How will sign be secured to building or ground? _____

Wording on Sign: _____

(see over)

Show location of sign on plot plan below, giving all distances to the nearest foot:

Rear

Side

Side

Street

I hereby consent to the foregoing application for a sign permit as owner of the premises:

Property Owner Signature

Address & Phone #

- Examined by Building Inspector
- Permit issued by Building Inspector
- Referred to Planning Board for Approval

Sign Review by Planning Board \$100.00 Date: _____

Annual Permit Fee \$ 50.00 Check # _____

Temporary Permit Fee \$ 20.00 Cash: _____

Amount Paid \$ _____

Approved By: _____ Date: _____