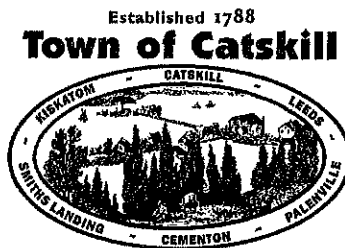


Catskill Town Hall  
439 Main Street  
Catskill, NY 12414



Phone: (518) 943-2141  
Fax: (518) 943-5251

## APPLICATION FOR SIGN PERMIT (NEW SIGN)

The permit is nontransferable and is only for the original Applicant.

The following items must be submitted to the Code Enforcement Office as appropriate before a Sign Permit will be granted. The Applicant shall check each box for which information is being submitted or write the initials "N/A" to indicate that the item does not apply to the proposed work scope.

- ☐ A completely filled in application form must be submitted. The application must accurately describe all of the work covered by the Sign Permit.
- ☐ Written consent of the owner of the property upon which the sign is to be erected must be attached to this application giving the Applicant, if the applicant is not the property owner, permission to apply for this permit or alternatively, a copy of the contract made with the property owner may be attached.
- ☐ Written consent of the owner of the property upon which the sign is to be erected must be attached to this application, for the Town of Catskill, by way of its agents, to enter the property to effectuate and enforce the Code of the Town of Catskill Chapter 134 – Signs (see [www.townofcatskillny.gov](http://www.townofcatskillny.gov) for the Town Code).
- ☐ Every sign shall bear the permit number, permanently and visibly shown. Failure to do so shall constitute cause for revocation of the permit.
- ☐ An elevation view of the proposed sign (attach additional pages as required).
- ☐ A site plan showing the relationship (in feet) of the proposed sign to nearby buildings, structures, roadways, and property lines (attach additional pages as required).
- ☐ The graphic design of the proposed sign including symbols, letters, materials, and colors (attach additional pages as required).
- ☐ The visual message, text, copy or content of the proposed sign (attach additional pages as required).
- ☐ Proof of General Liability, Workers' Compensation, and Disability Benefits Insurance (or if applicable, proof of legal exemption from such insurance requirements) for the sign installer (or for the property owner if the property owner is performing the work) must be submitted. Please use the guidelines on the following sheet to determine which insurance forms need to be submitted. Submitting incorrect forms will likely delay issuance of the Building Permit. Three separate forms, one for each type of insurance mentioned above, will be required except when a legal exemption exists in which case only two separate forms will be required (one form for General Liability and one form documenting the exemption for Workers' Compensation and Disability Benefits).
- ☐ Cash or check made payable to Town of Catskill for the Permit Fee.

Upon approval of this application, the Code Enforcement Officer will issue a Sign Permit to the Applicant. Such permit shall be kept on the premises available for inspection throughout the progress of the work. **All changes to the sign and/or the sign installation method must be reported to the Code Enforcement Office via a signed change order from the Applicant.** The permit will only be honored for the scope of work for which it has been issued. No work is to commence until the Sign Permit has been granted and issued.

It is ultimately the **Property Owner's responsibility** to ensure that required Code Enforcement Office inspections are scheduled and satisfactorily completed. The Code Enforcement Office needs **at least 24 hours advance notice when scheduling inspections.** Final inspections and obtaining the Certificate of Compliance is also ultimately the **responsibility of the Property Owner.**

**PERMIT APPLICATIONS SHALL NOT BE ACCEPTED WITHOUT THE STATED INSURANCE REQUIREMENTS**

**Each application must be accompanied with current insurance forms as determined below.**

If the **Applicant** is the **Owner** of 1, 2, 3, or 4 Family Dwelling and **lives in the subject residence** (i.e., owner-occupied):

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Is owner performing all the work?                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is owner not compensating the individual performing the work?         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the owner paying individuals a total of less than 40 hours a week? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If **"YES"** to one of the above questions (and the property owner lives in the residence), we require: a copy of the **property owner's Homeowner's Insurance Policy** showing **General Liability** coverage and a completed exemption **Form BP-1** (available in our Town Hall office or downloadable from the Town's website, [www.townofcatskillny.gov](http://www.townofcatskillny.gov)). Please note that **Form BP-1 can only be used in the case that the property owner lives in the residence where the proposed work is to take place.** Otherwise, the property owner must complete exemption Form CE-200 as is discussed below.

If **"NO"** to all above questions or if the Prime Contractor performing the work is a **business entity** or if the property owner performing the work does not live in the subject residence, we require proof of the Prime Contractor's or property owner's (who is performing the work) **General Liability** coverage and one of the following proofs of having or being exempt from having **Workers' Compensation and Disability Benefits insurance** (either A, B or C):

**A. Affidavit of Exemption:**

Form CE-200 \_\_\_\_\_ (This form needs to be completed online at [www.wcb.ny.gov](http://www.wcb.ny.gov))  
*"A helpful step by step instruction sheet is available upon request in our Town Hall office"*

**B. Certificates of Workers' Compensation Insurance and Disability Benefits Insurance:**

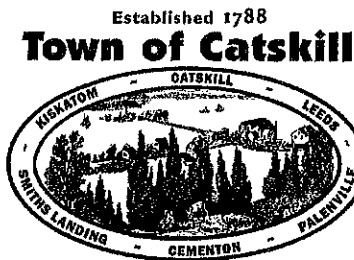
(Workers' Comp.)      Form C-105.2 \_\_\_\_\_      or State Insurance Fund Form U-26.3 \_\_\_\_\_  
**AND**  
(Disability Benefits)      Form DB-120.1 \_\_\_\_\_

**C. Self-insured or participating in authorized self-insurance plan:**

Form SI-12 \_\_\_\_\_      or      Form GSI-105.2 \_\_\_\_\_  
**AND**  
Form DB-155 \_\_\_\_\_

**Note: ACORD forms, while acceptable as proof of General Liability Insurance coverage, are NOT acceptable as proof of NYS Workers' Compensation or Disability Benefits Insurance coverage!**

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## APPLICATION FORM FOR A SIGN PERMIT (NEW SIGN)

Sign Permit expires six (6) months from date of issuance

### FOR OFFICIAL USE ONLY

Tax Map No.: \_\_\_\_\_ Permit No.: \_\_\_\_\_  
Zoning District: \_\_\_\_\_ Approval Date: \_\_\_\_\_  
Location of Work: \_\_\_\_\_ Disapproval Date: \_\_\_\_\_  
Reason for Disapproval: \_\_\_\_\_  
Renewal of Sign Permit No.: \_\_\_\_\_

\_\_\_\_\_  
Signature of Code Enforcement Officer

Street Address where work is to take place: \_\_\_\_\_

Use of Land: ☐ Residential ☐ Vacant ☐ Commercial/Ag. \_\_\_\_\_  
Name of Business/Farm

Applicant is: Property Owner \_\_\_\_\_ Sign Owner \_\_\_\_\_ Agent \_\_\_\_\_ Sign Installer/Contractor \_\_\_\_\_

Applicant: Name \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Prop. Owner: Name \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Sign Owner: Name \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Contractor: Name \_\_\_\_\_ Email \_\_\_\_\_  
Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

### SIGN SPECIFICATIONS:

Style of Sign: ☐ Free-Standing ☐ Portable ☐ Wall Mounted ☐ Projecting ☐ Column ☐ Billboard  
☐ Other (describe) \_\_\_\_\_

Dimensions of Sign: \_\_\_\_\_ Total Square Feet: \_\_\_\_\_

Illuminated<sup>(1)</sup>: [ ] No [ ] Yes If illuminated, describe method and position of illumination below:

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<sup>(1)</sup> Note that a Greene County licensed electrician must perform all electric wiring and a third-party electrical inspection certificate must be provided to the Code Enforcement Office upon completion.

Electrician Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Describe visual message, text, copy or content of the sign (or attach non-returnable picture/sketch of sign):

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Total number of signs that currently exist on the subject parcel with dimensions and location description:

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Estimated cost of the proposed sign including installation <sup>(1)</sup> \$ \_\_\_\_\_

<sup>(1)</sup> The cost for the Sign Permit is not derived from the estimated cost of the proposed sign including installation requested above. This estimated cost figure which should include estimates for materials and labor (even if the property owners are doing the work themselves), is used only for our department's required reporting to the New York State Department of State and has no effect on the property's assessment.

TO BE SPECIFIED BY THE CODE ENFORCEMENT OFFICE: Permit Fee \$ \_\_\_\_\_

***The Applicant agrees to the following requirements:***

- A. All electrical work must be performed by a Greene County Licensed Electrician.
- B. All work shall be performed in accordance with the documents submitted and accepted as part of this application. The Code Enforcement Officer shall be notified immediately in the event of changes occurring during installation. Any deviation from the approved plans must be authorized by the approval of revised plans subject to the same procedure established for the examination of the original plans. An additional permit fee may be charged depending on the extent of the variation from the original plans.
- C. All required installation inspections must be performed before continuing to the next stage of work. Failure to schedule inspections will result in the issuance of a Stop Work Order. Digital pictures will not be accepted in lieu of physical inspections by an authorized Code Enforcement Office representative.
- D. The work covered by this application may not be started before the issuance of the Sign Permit.
- E. No sign covered by a Sign Permit shall be used (including illumination) until the Final Sign Permit Inspection has been passed and a Certificate Compliance has been granted by the Code Enforcement Office. Violators will be subject to fines as prescribed by law.

**APPLICATION IS HEREBY MADE** to the Code Enforcement Office for the issuance of a Sign Permit pursuant to the current New York State Uniform Code and/or Catskill Town Code. By signing below, the Applicant stipulates that he/she has read the requirements prescribed herein and agrees to comply with all applicable laws, ordinances and regulations.

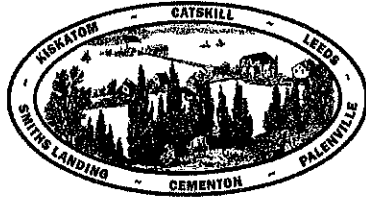
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Signature of Applicant

---

Date

Established 1788  
**Town of Catskill**



Catskill Town Hall  
439 Main Street  
Catskill, NY 12414

Phone: (518) 943-2141  
Fax: (518) 943-5251

## SIGN PERMIT CONSENT FORM OF PROPERTY OWNER TO TOWN

I, \_\_\_\_\_, am the owner of the property located at

PRINTED NAME

\_\_\_\_\_

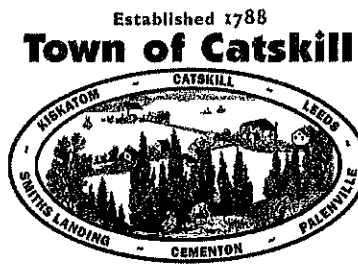
STREET ADDRESS

*upon which a proposed sign is to be erected. I hereby give the Town of Catskill, by way of its agents, my consent to enter above property to effectuate and enforce Chapter 134 - Signs of the Code of the Town of Catskill.*

\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER

\_\_\_\_\_  
DATE

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## SIGN PERMIT CONSENT FORM OF PROPERTY OWNER TO APPLICANT\*

\*Not required if Applicant is the Property Owner.

I, \_\_\_\_\_, am the owner of the property located at  
PRINTED NAME

\_\_\_\_\_  
STREET ADDRESS

*upon which a proposed sign is to be erected. I hereby give*

\_\_\_\_\_  
INDIVIDUAL NAME OR COMPANY NAME OF APPLICANT

*my consent to submit an application for a Sign Permit to the Town of Catskill on my behalf.*

\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER

\_\_\_\_\_  
DATE