ARCHITECTURAL REVIEW BOARD

- Meets 2nd Tuesday of each month at 7:30 pm.
- Application must be submitted at least 4 weeks prior to hearing.
- Application to Board must include six (6) packets to be submitted (1 original & 5 copies) of the following:
  
1. Application
2. Color renderings indicating sizes and materials.

<table>
<thead>
<tr>
<th>Filing Fee for Application</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential</td>
</tr>
<tr>
<td>Commercial</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Penalty Fee for Changes without an Approval</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential</td>
</tr>
<tr>
<td>Commercial</td>
</tr>
</tbody>
</table>
VILLAGE OF PATCHOGUE

APPLICATION FOR ARCHITECTURAL REVIEW BOARD

OFFICIAL USE ONLY:

Filing Fee Application Received By:
Date Received Permit Requested: Building Permit Certificate of Occupancy
Certificate of Appropriateness Sign Permit
Comments:

A.R.B.-approved Disapproved

1. Applicant:
   Name
   Address
   Telephone

2. Owner: (if different)
   Name
   Address
   Telephone

3. Plans Prepared By:
   Name
   Address
   Telephone
   License #
   (If more than one owner, provide information for each)

4. If applicant is a corporation, give the name and title of responsible officer:
   Name
   Address

5. Name of Proposed Development

6. Address:

7. Tax Map Section Block Lot Zoning Classification

8. Total Site Area (Sq. Ft./Acres) 9. Total Building Area

10. Current Site Use

11. Are there any covenants or restrictions affecting the premises for which site plan approval
    is sought? If so, attach a copy certified by the Suffolk County Clerk.

12. Has applicant secured a Special Permit and/or Variance from the Zoning Board of Appeals?
    If so, state date and case number
    Attach a copy of Board of Appeals decision letter.

13. List any state, county or federal permits/approvals needed and attach copies of same.

I HEREBY DEPOSE AND STATE THAT ALL THE ABOVE STATEMENTS AND INFORMATION ARE TRUE.

Sworn to before me this ___ day of ___________, 19___

Notary Public

Signature of Legally Responsible Person
(Owner or Authorized Agent)
VILLAGE OF PATCHOGUE
APPLICATION FOR ARCHITECTURAL REVIEW BOARD

WALL SIGNAGE:

1. Number of Wall Signs being Proposed: ______

2. Location of Wall Signs: ______ east elevation ______ west elevation ______ south elevation ______ north elevation

3. Dimensions of Wall Signs: ______ x ______ ______ x ______ ______ x ______ ______ x ______ ______ x ______

4. Square Footage of Wall: ______

5. Percentage of Wall Coverage for Signage: ______

6. Materials of Proposed Signage: __________________________________________________________

   __________________________________________________________

7. Lighting Proposed: __________________________________________________________

   __________________________________________________________

DETACHED SIGNAGE:

1. Number of Detached Signs being Proposed: ______

2. Location of Detached Signage: east side ______ west side ______ south side ______ north side ______

3. Number of Feet Setback from Property Line for location of detached signage: ______

4. Dimensions of Detached Signs: ______ x ______ ______ x ______ ______ x ______ ______ x ______ ______ x ______ ______ x ______

5. Total Square Footage of Detached Signs: ______________________________________________________

6. Height of Detached Signs: __________________________________________________________

7. Materials of Proposed Detached Signs: ______________________________________________________

   __________________________________________________________

8. Type of Proposed Lighting: __________________________________________________________

9. Landscaping surrounding proposed detached signage: __________________________________________

   __________________________________________________________

EACH APPLICATION MUST BE ACCOMPANIED BY COLOR RENDERSINGS FOR ALL SIGNAGE & PHOTOGRAPHS OF ELEVATIONS FOR PROPOSED SIGNAGE.

THIS APPLICATION WILL NOT BE PROCESSED UNLESS ALL INFORMATION IS PROPERLY SUPPLIED.