



VILLAGE OF PLEASANTVILLE * BUILDING DEPARTMENT

80 WHEELER AVENUE * PLEASANTVILLE, NY 10570

PHONE (914) 769-1926 * FAX (914) 769-5519

WWW.PLEASANTVILLE-NY.GOV

PETITION TO ARCHITECTURAL REVIEW BOARD

NOTE: ONE (1) COPY OF ALL PERTINENT INFORMATION MUST BE SUBMITTED WITH PETITION A MINIMUM TEN (10) DAYS IN ADVANCE OF SCHEDULED ARB MEETING DATE

*** SEE ATTACHED SUBMISSION REQUIREMENTS FOR ADDITIONAL INFORMATION ***

SECTION I – PROJECT ADDRESS: _____

SECTION II – CONTACT INFORMATION: (PLEASE PRINT CLEARLY. ALL INFORMATION MUST BE CURRENT)

APPLICANT: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

TENANT: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

SECTION III – TYPE OF APPLICATION ☐ BUILDING REVIEW ☐ SIGN REVIEW

SUBMITTED INFORMATION (CHECK ALL THAT APPLY)

☐ FLOOR PLANS ☐ SITE PLAN ☐ EXISTING RENDERING / PHOTOS ☐ SCALED DETAILED ELEVATIONS

☐ PROPOSED RENDERINGS / PHOTOS ☐ MATERIALS ☐ SAMPLES ☐ COLOR SWATCHES ☐ PLANTINGS

☐ LIGHTING FIXTURES ☐ OTHER PERTINENT INFORMATION

SECTION IV – LANDLORD / BUILDING OWNER'S CONSENT

NOTE: WRITTEN CONSENT REQUIRED; APPLICATION WILL NOT BE ACCEPTED WITHOUT IT. NO EXCEPTIONS

OWNER'S NAME: _____

OWNER'S SIGNATURE: _____

SECTION V – PERMIT FEES: \$75 APPLICATION FEE

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SECTION VI – CONTACT INFORMATION: (PLEASE PRINT CLEARLY. ALL INFORMATION MUST BE CURRENT)

ARCHITECT/ENG: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

DESIGNER: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

CONTRACTOR: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

ELECTRICIAN: _____

ADDRESS: _____

PHONE: _____ CELL: _____ EMAIL: _____

SECTION VII – APPLICANT CERTIFICATION

I HEREBY CERTIFY THAT I HAVE READ THE INSTRUCTIONS & EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE & CORRECT. ALL PROVISIONS OF LAWS & ORDINANCES COVERING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR LAND USE OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

ZONE: _____ SECTION: _____ BLOCK: _____ LOT: _____

ADDITIONAL BOARD / DEPT. APPROVALS REQUIRED:

☐ ZONING ☐ PLANNING ☐ DPW / ENGINEERING ☐ WCDOH ☐ WETLANDS ☐ FLOOD DEV

BUILDING DEPARTMENT CHECKLIST:

☐ APP FEE _____ ☐ REQUIRED DOCUMENTS ☐ SIX (6) SETS OF DOCS & PERTINENT INFO

☐ CHECK #: _____ ☐ CASH

NAME ON CHECK: _____

BLDG. INSPECTOR SIGN OFF: _____ DATE: _____

ARB MEETING RESULTS:

☐ APPROVED AS SUBMITTED ☐ APPROVED AS NOTED ☐ DENIED

COMMENTS: _____

MEMBERS IN ATTENDANCE:: (CHECK BOX & NOTE INITIALS)

☐ CHAIRMAN _____ ☐ MEMBER # 1 _____ ☐ MEMBER # 2 _____ ☐ MEMBER # 3 _____ ☐ MEMBER # 4 _____