

Plan Submittal Form

Address: 200 Beacon + 171 Dr, Dobbs Ferry

Application #: _____

Project: The Summit New Signs

Name: Meagan Baizar

Email: ~~mea~~ mbaizar@rosepmg.com

Phone: 914 760-4890

Plans attached are being submitted for (check appropriate box):

- ☐ Building permit application 1 PDF copy & 2 paper copies ¼ scale
- ☐ Amendment to an application or permit, 2 sealed copies
- ☐ Final As Built to close permit, 1 sealed copy
- ☐ Final survey to close permit, 1 sealed copy

Plans attached are submitted at the direction of the Building Inspector for review by the following board (check all that apply):

- ☐ BOT- 1 PDF copy + 5 paper copies ¼ scale
- ☐ PB - 1 PDF copy + 4 paper copies ¼ scale
- ☐ ZBA - 1 PDF copy + 4 paper copies ¼ scale
- ☒ AHRB - 1 PDF copy + 2 paper copies ¼ scale

Received Stamp:



RECEIVED

Dobbs Ferry Architectural & Historical Review Board

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VILLAGE OF DOBBS FERRY
PLANNING DEPARTMENT

SUBMISSION REQUIREMENTS FOR SIGNS, AWNINGS AND CANOPIES

Definition of Signs, Awnings and Canopies: The construction, reconstruction, replacement or alteration of any awning, canopy, advertising sign or business sign of whatever shape, size or character.

Applicant Name: 200 Beacon Hill Dr LLC Date Filed: _____

Property Address: 200 Beacon Hill Dr

Check Application Type (may be more than one):

☒ Sign ☐ Awning ☐ Canopy

Description of Proposed Work:

replace existing signs for updated versions

A copy of this completed form is to be included as a cover sheet for submissions to the AHRB.

In the table below, please indicate the type of submission by checking the applicable box or boxes indicated. Items denoted * in the column below your project type are the minimum required items for a complete application to the AHRB. Please indicate the type of submission. Please indicate by initialing each box in the appropriate column confirming that the information has been submitted. Do not initial for items if they are not included.

The AHRB reserves the right to ask for any additional information as specified on this form, if not included in the initial application, and may deem the application incomplete and not ready for review until this information is included. Resubmissions should reflect all comments made at the previous meeting and should be indicated with a note or a bubble on the plan, and shall include any additional requested information.

Initial Below ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	← Check Box (or Boxes) Above Appropriate Columns
	Sign	Awning	Canopy	Freestanding Sign*	
REQUIRED PLAN AND DOCUMENT SUBMISSION					
1 PDF & 2 Paper COPIES OF EACH ITEM (unless otherwise specified)					
	•	•	•	•	Detailed design/construction drawings of each proposed sign, awning or canopy, at a legible and measurable scale.
	•	•	•	•	Dimensions including height, length, thickness and depth of each proposed sign, awning or canopy.
	•	•	•	•	Proposed lettering, colors and graphics.
	•	•	•	•	Dimensions of letter heights and sentence lengths.

CONTINUED ON NEXT PAGE

← Check Box (or Boxes) Above Appropriate Columns

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Initial Below ↓	Sign <input type="checkbox"/>	Awning <input type="checkbox"/>	Canopy <input type="checkbox"/>	Freestanding Sign* <input type="checkbox"/>	
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Sections through important elevations and typical trim at a scale to clearly show profiles, trims, corners and their sizes.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Proposed method of attachment to the building.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Building elevations and/or photo simulations showing the location of all proposed signs, awnings, canopies, proposed lighting and existing signs. Indicate height and width dimensions of storefront, ground plane location, height of all new work above ground plane.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Clear, color photos of the existing building / premises showing existing conditions.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Clear, color photos of the existing streetscape: to include 2 stores to the left and 2 stores to the right of the proposed site and the 5 stores directly across the street.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Material, finish and color schedule is included <u>on</u> submitted plans.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Specification sheet for each new exterior light fixture.
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Provide a note on plan indicating that all lighting shall comply with section 300-41
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	(One set only) Actual material, finish and color samples to be presented at AHRB meeting.
				<input checked="" type="checkbox"/>	Proposed location of freestanding sign on site plan, including landscaping and lighting.*

* Freestanding signs to be reviewed and approved only in the DG or CP districts or with and subject to a ZBA variance.

Applicant Name: 200 Beacon Hill Drive
Neagan Baird Signature: [Signature] Date: 5/12/12

By signing this form you are affirming that you have included all the required information listed above.

Complete application received by the Village of Dobbs Ferry, on behalf of the Dobbs Ferry AHRB by:

Name _____ Signature _____ Date _____