

SIGN PERMIT APPLICATION

24-06

Project Name: Definitions of Beauty

Project Street Address: 300 Main St

Section: _____ Block: _____ Lot(s): _____ Zone: _____

(Section, Block and Lot and Zoning District information MUST be completed by the applicant)

Owner: Giovanni Borano

Address: 300 Main Street Eastchester NY 10709

Phone #: 914 268-0020 Email: DrG@BoranoDental.com

Lessee: Definition of Beauty

Address: 300 Main Street, Eastchester NY. 10709

Phone #: 646-852-5586 Email: info@definition-beauty.com

Sign Company: San Signs & Awnings Contact Name Jamie Jones

Address: 925 Saw Mill River Rd Yonkers, NY 10710

Phone #: 914-375-6674 Email: jjones@sansigns.com

* Is lighting being proposed? Yes _____ No X If "YES", is lighting New _____ or Existing _____

* If lighting is "Existing", is the existing lighting/electrical being altered? Yes _____ No _____

* **Please Note** * If proposed lighting is "New" or being "Altered", a separate **Electrical Permit** is required.

APPLICATION CHECKLIST

Submission Items	Check Box
Completed Sign Application and Application Checklist	
Design/construction details of each proposed sign/awning at a legible and measurable scale showing: <ul style="list-style-type: none"> <input type="checkbox"/> Proposed lettering, colors and graphics <input type="checkbox"/> All proposed dimensions (sign height, length and thickness; letter heights and widths; etc.) <input type="checkbox"/> Construction details (including, but not necessarily limited to, how the sign will be attached to a building facade or anchored to the ground) 	✓
Building elevations and/or photo simulations showing the location of all proposed signs/awnings and proposed lighting (and, where applicable, all existing signs proposed to remain), including: <ul style="list-style-type: none"> <input type="checkbox"/> The dimension of the storefront on which the sign will be located. (Measured from the outside edge of the exterior building walls or from the center line of shared walls. Note that proposed wall signs may not exceed 75% of the length of the storefront) <input type="checkbox"/> The dimension of the sign above the sidewalk or ground plane. <input type="checkbox"/> The type and location of proposed lighting fixtures. 	✓
For free standing signs, a site plan showing: <ul style="list-style-type: none"> <input type="checkbox"/> The proposed location of the free-standing sign. (Note that free-standing signs must be located within the property lines and may not be located within or overhanging a public right-of-way). <input type="checkbox"/> Proposed landscaping, if applicable. <input type="checkbox"/> The type and location of proposed lighting, if applicable. 	N/A
Physical samples of proposed colors and materials. (If possible, provide fabric and color sample swatches with each application; Bring samples to the Sign Review meeting).	✓
Catalogue cut sheets of proposed lighting fixtures	N/A
Color photographs of the existing building/premises, showing existing conditions, and adjacent properties a minimum of 100 feet to the left and right and on the opposite side of the road. (Black and white or unclear photographs will not be accepted.)	✓
If the proposed signs/awnings do not conform to all requirements of the Sign Law, the applicant <u>MUST</u> provide drawings which show fully conforming signs for comparison by the ARB, including: (1) dimensioned drawings of the conforming signs; and (2) building elevations or photo simulations showing the conforming signs.	

January 11, 2024

AFFIDAVIT OF OWNERSHIP

State of New York)
County of Westchester) SS:

I, Giovanni Boiaro, being duly sworn, deposes and says:
(clearly print first and last name of property owner)

(check appropriate box)

- ☒ I am the owner of the property for which this application is being submitted.
☐ I am an officer of the corporation that owns the property for which this application is being submitted.

Further (check applicable box):

- ☐ I am submitting this application on my own behalf.
☒ I am authorizing the following individual to submit this application on my behalf:

San Signs & Awnings- Jamie Jones

(clearly print name of individual authorized to submit this application)

Further:

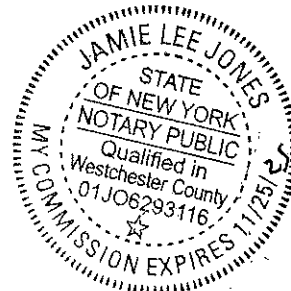
To the best of my knowledge, information and belief, all statements contained in this application are true, complete and correct, and all work will be performed in the manner set forth in the application and in the plans and specifications filed therewith, and in accordance with all applicable laws, ordinances and regulations.

[Signature]
(Signature of Owner)

Giovanni Boiaro
(Print Name of Owner)

Sworn to before me this 9 day of Feb, 20 24

[Signature]
(Signature of Notary Public)





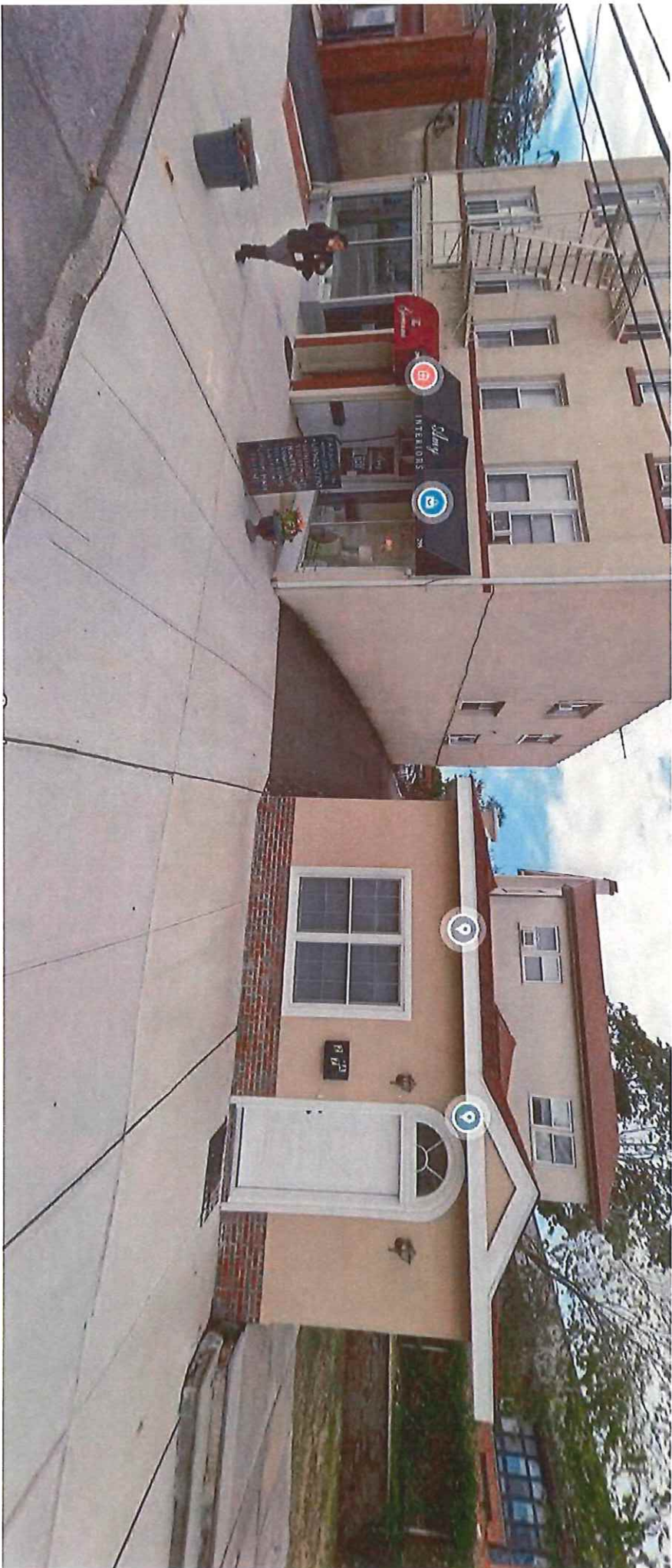
DENTAL OFFICE

300

BOJANO
DENTAL
GROUP
914-268-0020
www.bojandental.com

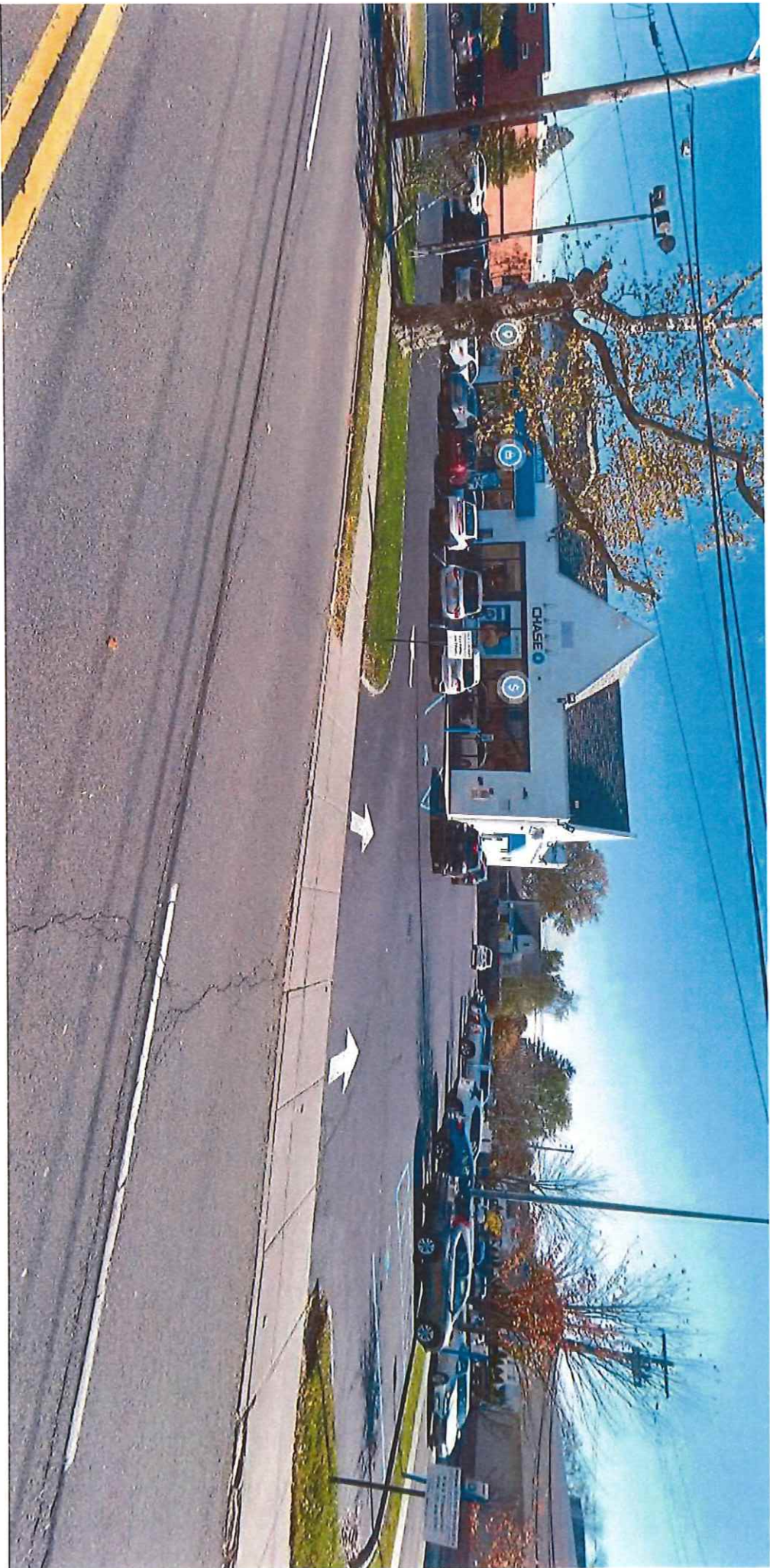
Smiles
UNDER THE SEA
— Pediatric Dentistry —

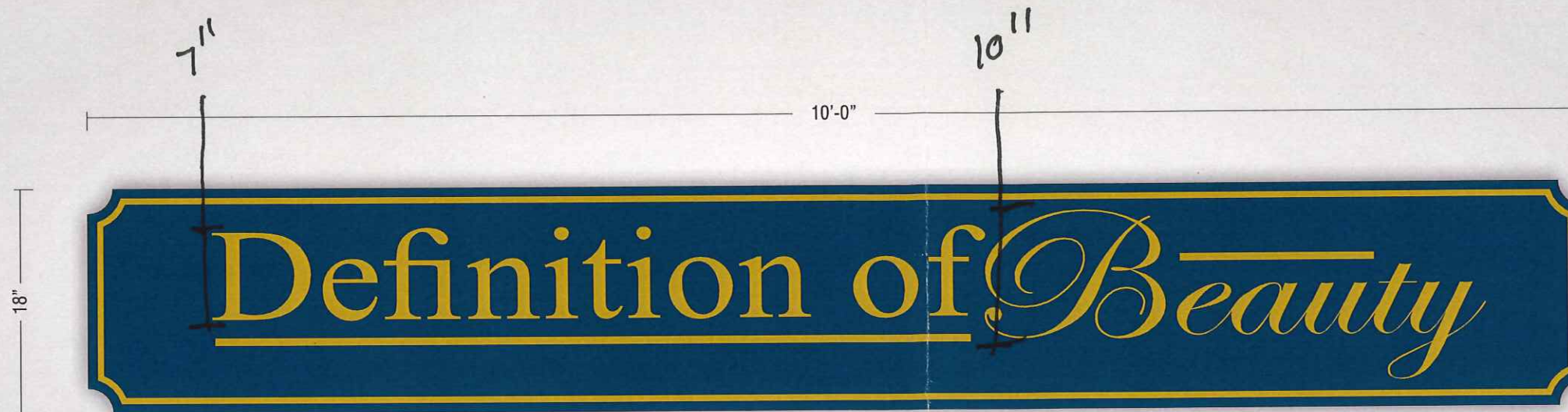
GENERAL • COSMETIC
DENTISTRY
MILANO • DENTISTRY









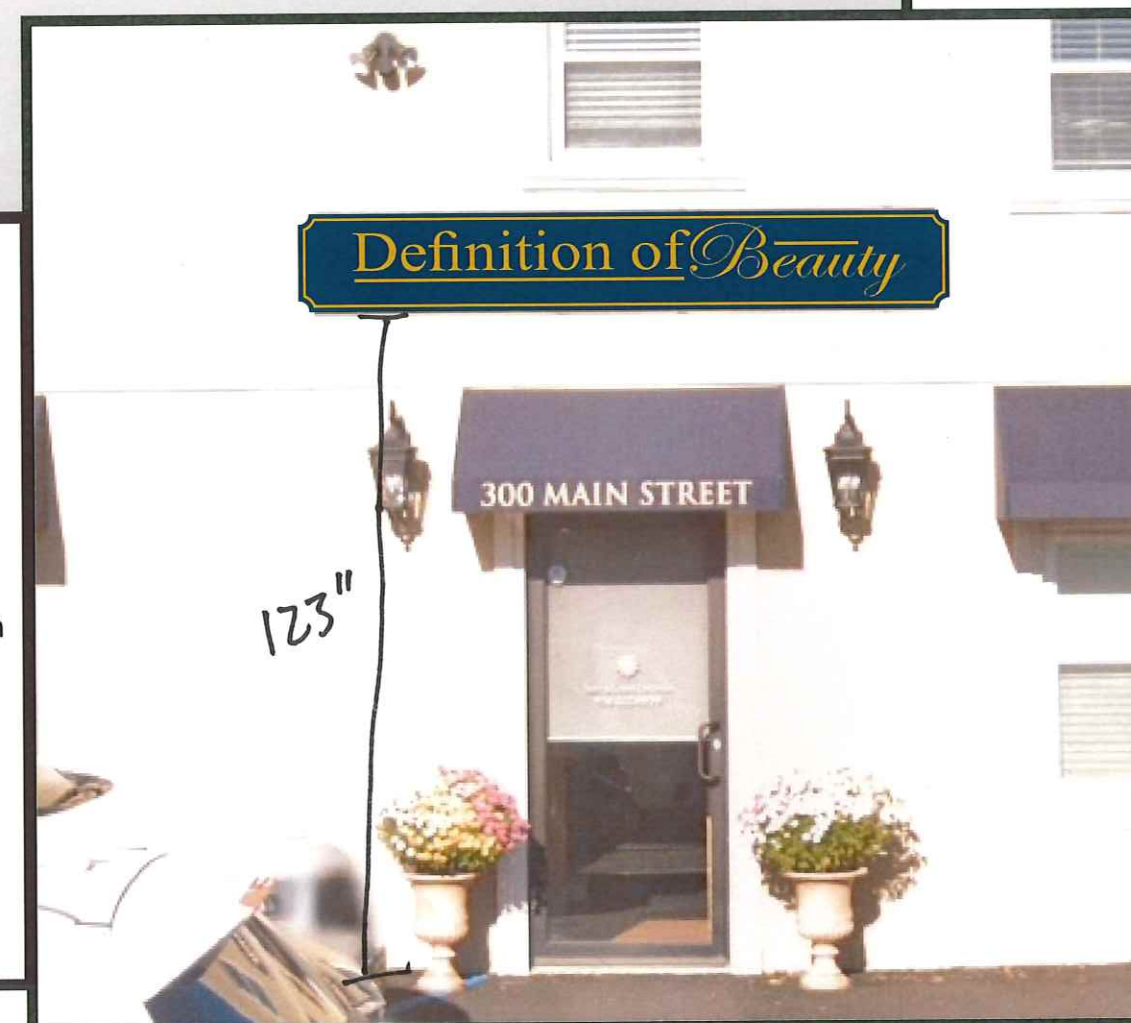
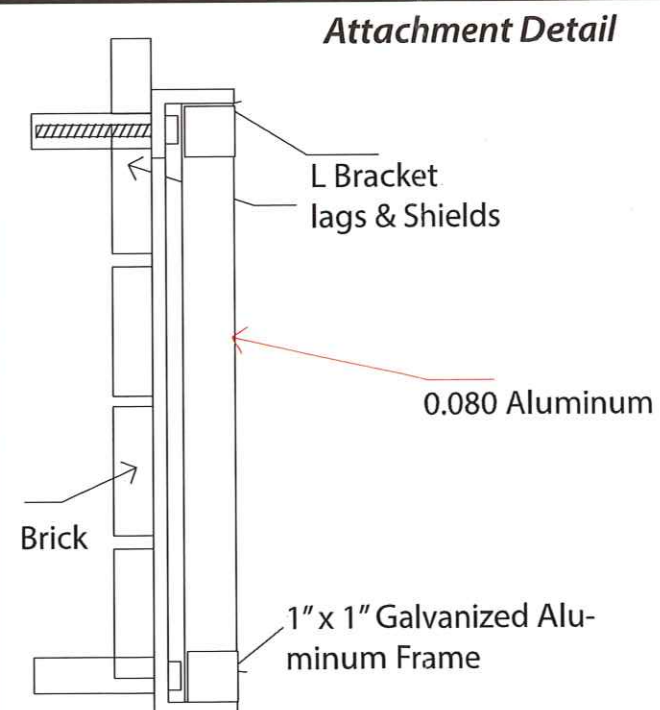


RE-PURPOSE EXISTING S/F MDO PANEL SIGN.

SPECIFICATIONS:

Remove clean and repaint existing MDO panel Dark Navy.
New 23k Gold vinyl graphics applied.

**Reinstall in original location.*



Customer Information

Job Name: **BEAUTY23-A1_2**
Customer: Definition of Beauty
Date: 12/6/2023
Sales Person: Alexis Clavijo
Designed by: Jason Cooper

Customer Approval

Customer Signature

Date

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