

**Town of Lansing Zoning Board of Appeals
Application for Variance**

Application Fee \$175.00

Application Date 2/22/16

Property for which Variance is being requested

Tax Parcel No. _____

Street Address SECTION RT 34 LA YUGAVISTA DR.

Applicant's Name and Address

ALL WHITE SIGN
DENNIS RATTAY

Zoning District (check one)

Phone 607-359-2096 R1 ___
Cell 607-438-0101 R2 ___
Email d.a.white.sign@gmail.com R3 ___

(If Applicant different from owner, notarized written permission of owner must be attached hereto.)

Owner's Name and Address (if different)

DOLLAR GENERAL

B1 ___
B2 ___
L1 ___
RA ___
IR ___

Application for (check applicable item)

- A. Interpretation of Zoning Ordinance or Map
- B. Area Variance
- C. Use Variance
- D. Appeal of decision of Code Enforcement Officer

Request relates to provisions of (check applicable item)

- A. Town of Lansing Land use Ordinance, Section _____
- B. Town of Lansing Subdivision Regulations, Section _____
- C. Other (Identity) _____

Purpose of Request: (attach additional information if necessary)

- (1) REQUESTING ADDITIONAL SQFT OF WALL SIGN 48 SQFT
ALLOWABLE TO 96.5 SQFT TOTAL
- (2) REQUESTING ROAD SIGN SQFT FROM 48 SQFT ALLOWABLE
TO 50 SQ FT TOTAL
- (3) REQUESTING ADDITIONAL HEIGHT OF ROAD SIGN FROM
ALLOWABLE 15' to TOTAL 20' OAH

Justification of Request: (attach additional information if necessary)



TOWN of LANSING

"Home of Industry, Agriculture and Scenic Beauty"

ZONING, PLANNING AND CODE ENFORCEMENT

Box 186

Lansing, NY 14882

E-mail: tolcodes@tweny.ny.us

February 23, 2016

Albright Sign
Attn. Dennis Rattay
Po Box 62
Addison, NY 14801

Re: Install Two Signs - Dollar General on the corner of East Shore Drive & Cayuga Vista
Dear Mr. Noel,

This letter is to inform you that your Sign permit application request to install two Signs (one on the Dollar General Store and one free Standing in front of the Store) has been denied in accordance with the Town of Lansing Sign Local Law #1 of 2014. No freestanding Sign shall exceed 15' in height. No more than 2 Signs shall be allowed per each Premises and the area of each Sign shall not exceed the maximum allowed area for each such Sign as based upon its use and location. Commercial Sign District allows two Signs neither shall exceed 48 sq ft. If you wish to pursue the proposed project at the above location, an Application for an Area Variance must be submitted.

Feel free to contact our office with any questions you may have. We can be reached at 533-7054 or stop by in person at 29 Auburn Rd.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lynn Day'.

Lynn Day
Code Enforcement Officer

contribute to glare or distracting reflected light. The Enforcement Officer shall reasonably determine whether any Illuminated Sign causes, creates, or contributes to glare or any distracting reflected light as such terms are used in this subsection. In making any such determination the Enforcement Officer may employ Dark Sky standards.

5. All Illuminated Signs shall be subject to Site Plan Review.
 - D. Electronic Message Display Signs are allowed only in Commercial Sign Districts and all such Signs shall be subject to Site Plan Review.
 - E. Except for Wayfaring Signs issued pursuant to a Sign Permit, no Billboards or Off-Premises Signs are permitted or allowed in any Sign district or area of the Town without a use Variance.
 - F. Except for Wayfaring Signs, or unless otherwise allowed by this Local Law, or unless a permit therefor has been obtained by any governmental or public authorities having jurisdiction over such Public Right-of-Way, no Signs may be located within any Public Right-of-Way unless approved through a Site Plan Review process or pursuant to a Variance. Any Sign located within such Public Right-of-Way shall require permission or permits from any governmental or public authorities having jurisdiction over such Public Right-of-Way.
 - G. No freestanding Sign for Residential Based Businesses located within a Residential Sign District shall exceed 9' in height. No other freestanding Sign shall exceed 15' in height. Signs located or mounted upon the exterior of any building or structure shall not extend above the fascia or be mounted on the roof.
 - H. No Planned Sign Area may be sited within any Residential Sign District.
 - I. Unless expressly otherwise permitted by this Local Law, a Variance is granted, or unless within a Planned Sign Area: (i) for all Commercial Activity Signs and other commercial and business Signs, no more than 2 Signs shall be allowed per each Premises and the area of each such Sign shall not exceed the maximum allowed area for each such Sign as based upon its use and location and the requirements of this Local Law; and (ii) only one Residential Based Business Sign is allowed per each Premises upon which a residential business (or home occupation) is located.
 - J. The failure to timely comply with any conditions stated in any Site Plan Review approval, any Variance, or upon any Sign Permit shall be deemed a violation of this Local Law.

Article VI - Rules Applicable to Residential Sign Districts.

- A. Commercial Signs shall not exceed 18 ft².

- B. Residential Based Business Signs shall not exceed 9 ft².
- C. Multi-family dwelling, townhouse, mobile home park, housing development, and like residential Signs shall not exceed 12 ft² and only one Sign is allowed per entrance.
- D. Institution Signs shall not exceed 40 ft².

Article VII - Rules Applicable to Agricultural Sign Districts.

- A. Commercial Signs shall not exceed 48 ft².
- B. Residential Based Business Signs shall not exceed 24 ft².
- C. Multi-family dwelling, townhouse, mobile home park, housing development, and like residential Signs shall not exceed 12 ft² and only one Sign is allowed per entrance.
- D. Institution Signs shall not exceed 40 ft².

Article VIII - Rules Applicable to Commercial Sign Districts.

- A. Commercial Signs shall not exceed 48 ft².
- B. Residential Based Business Signs shall not exceed 24 ft².
- C. Multi-family dwelling, townhouse, mobile home park, housing development, and like residential Signs shall not exceed 12 ft².
- D. Shopping center or plaza Signs shall not exceed 48 ft², and individual store or business Signs within such shopping center or plaza shall not exceed 16 ft² for each business (and are in addition to the center's or plaza's Signage), unless pursuant to an approved Planned Sign Area.
- F. Institution Signs shall not exceed 48 ft².

Article IX - Planned Development Areas.

The Enforcement Officer shall examine the predominant purposes and uses of any Planned Development Area ("PDA") and shall then, for purposes of this Local Law, classify the PDA as subject to Residential Sign District rules, Agricultural Sign District rules, or Commercial Sign District rules.

617.20
Appendix B
Short Environmental Assessment Form

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
All BRITE SIGN + SERVICE			
Name of Action or Project: DOLLAR GENERAL			
Project Location (describe, and attach a location map): SEC RT 34 CAYUGA VISTA DRIVE			
Brief Description of Proposed Action: REQUEST TO ALLOW ADDITIONAL SQFT + HEIGHT OF PROPOSED SIGNS			
Name of Applicant or Sponsor: All BRITE SIGN / DENNIS RATTAY		Telephone: 607-359-2096	
		E-Mail: d.allbritesign@gmail.com	
Address: P.O. Box 62			
City/PO: ADDISON, N		State: NY	Zip Code: 14801
1. Does the proposed action only involve the legislative adoption of a plan, local law, ordinance, administrative rule, or regulation? If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
2. Does the proposed action require a permit, approval or funding from any other governmental Agency? If Yes, list agency(s) name and permit or approval:		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>
3.a. Total acreage of the site of the proposed action? _____ acres			
b. Total acreage to be physically disturbed? _____ acres			
c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? _____ acres		N/A	
4. Check all land uses that occur on, adjoining and near the proposed action.			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Residential (suburban) <input type="checkbox"/> Forest <input checked="" type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Parkland			

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____	NO	YES
_____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>ALL BRITE SIGN / DENNIS RATH</u> Date: <u>2-16-16</u>		
Signature: <u>Dennis Rath</u>		

Part 2 - Impact Assessment. The Lead Agency is responsible for the completion of Part 2. Answer all of the following questions in Part 2 using the information contained in Part 1 and other materials submitted by the project sponsor or otherwise available to the reviewer. When answering the questions the reviewer should be guided by the concept "Have my responses been reasonable considering the scale and context of the proposed action?"

	No, or small impact may occur	Moderate to large impact may occur
1. Will the proposed action create a material conflict with an adopted land use plan or zoning regulations?	<input type="checkbox"/>	<input type="checkbox"/>
2. Will the proposed action result in a change in the use or intensity of use of land?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will the proposed action impair the character or quality of the existing community?	<input type="checkbox"/>	<input type="checkbox"/>
4. Will the proposed action have an impact on the environmental characteristics that caused the establishment of a Critical Environmental Area (CEA)?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the proposed action result in an adverse change in the existing level of traffic or affect existing infrastructure for mass transit, biking or walkway?	<input type="checkbox"/>	<input type="checkbox"/>
6. Will the proposed action cause an increase in the use of energy and it fails to incorporate reasonably available energy conservation or renewable energy opportunities?	<input type="checkbox"/>	<input type="checkbox"/>
7. Will the proposed action impact existing:	<input type="checkbox"/>	<input type="checkbox"/>
a. public / private water supplies?	<input type="checkbox"/>	<input type="checkbox"/>
b. public / private wastewater treatment utilities?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will the proposed action impair the character or quality of important historic, archaeological, architectural or aesthetic resources?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will the proposed action result in an adverse change to natural resources (e.g., wetlands, waterbodies, groundwater, air quality, flora and fauna)?	<input type="checkbox"/>	<input type="checkbox"/>

RESET

	No, or small impact may occur	Moderate to large impact may occur
10. Will the proposed action result in an increase in the potential for erosion, flooding or drainage problems?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will the proposed action create a hazard to environmental resources or human health?	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 - Determination of significance. The Lead Agency is responsible for the completion of Part 3. For every question in Part 2 that was answered "moderate to large impact may occur", or if there is a need to explain why a particular element of the proposed action may or will not result in a significant adverse environmental impact, please complete Part 3. Part 3 should, in sufficient detail, identify the impact, including any measures or design elements that have been included by the project sponsor to avoid or reduce impacts. Part 3 should also explain how the lead agency determined that the impact may or will not be significant. Each potential impact should be assessed considering its setting, probability of occurring, duration, irreversibility, geographic scope and magnitude. Also consider the potential for short-term, long-term and cumulative impacts.

<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action may result in one or more potentially large or significant adverse impacts and an environmental impact statement is required.
<input type="checkbox"/>	Check this box if you have determined, based on the information and analysis above, and any supporting documentation, that the proposed action will not result in any significant adverse environmental impacts.
_____	_____
Name of Lead Agency	Date
_____	_____
Print or Type Name of Responsible Officer in Lead Agency	Title of Responsible Officer
_____	_____
Signature of Responsible Officer in Lead Agency	Signature of Preparer (if different from Responsible Officer)

PRINT

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AGRICULTURAL DATA STATEMENT

Per § 305-a of the New York State Agriculture and Markets Law, any application for a special use permit, site plan approval, use variance, or subdivision approval requiring municipal review and approval that would occur on property within a New York State Certified Agricultural District containing a farm operation or property with boundaries within 500 feet of a farm operation located in an Agricultural District shall include an Agricultural Data Statement.

- A. Name of applicant: ALL BRITE SIGN / DENNIS RATTAY
Mailing address: P.O. Box 62
ADDISON, NY 14800

- B. Description of the proposed project: REQUEST TO ALLOW ADDITIONAL
SQFT + HEIGHT OF PROPOSED SIGNS

- C. Project site address: SEC 34 CAYUGA VISTA DR Town: LANISING

- D. Project site tax map number: _____

- E. The project is located on property:
 within an Agricultural District containing a farm operation, or
 with boundaries within 500 feet of a farm operation located in an Agricultural District.

- F. Number of acres affected by project: _____

- G. Is any portion of the project site currently being farmed?
 Yes. If yes, how many acres _____ or square feet _____ ?
 No.

- H. Name and address of any owner of land containing farm operations within the Agricultural District and is located within 500 feet of the boundary of the property upon which the project is proposed.

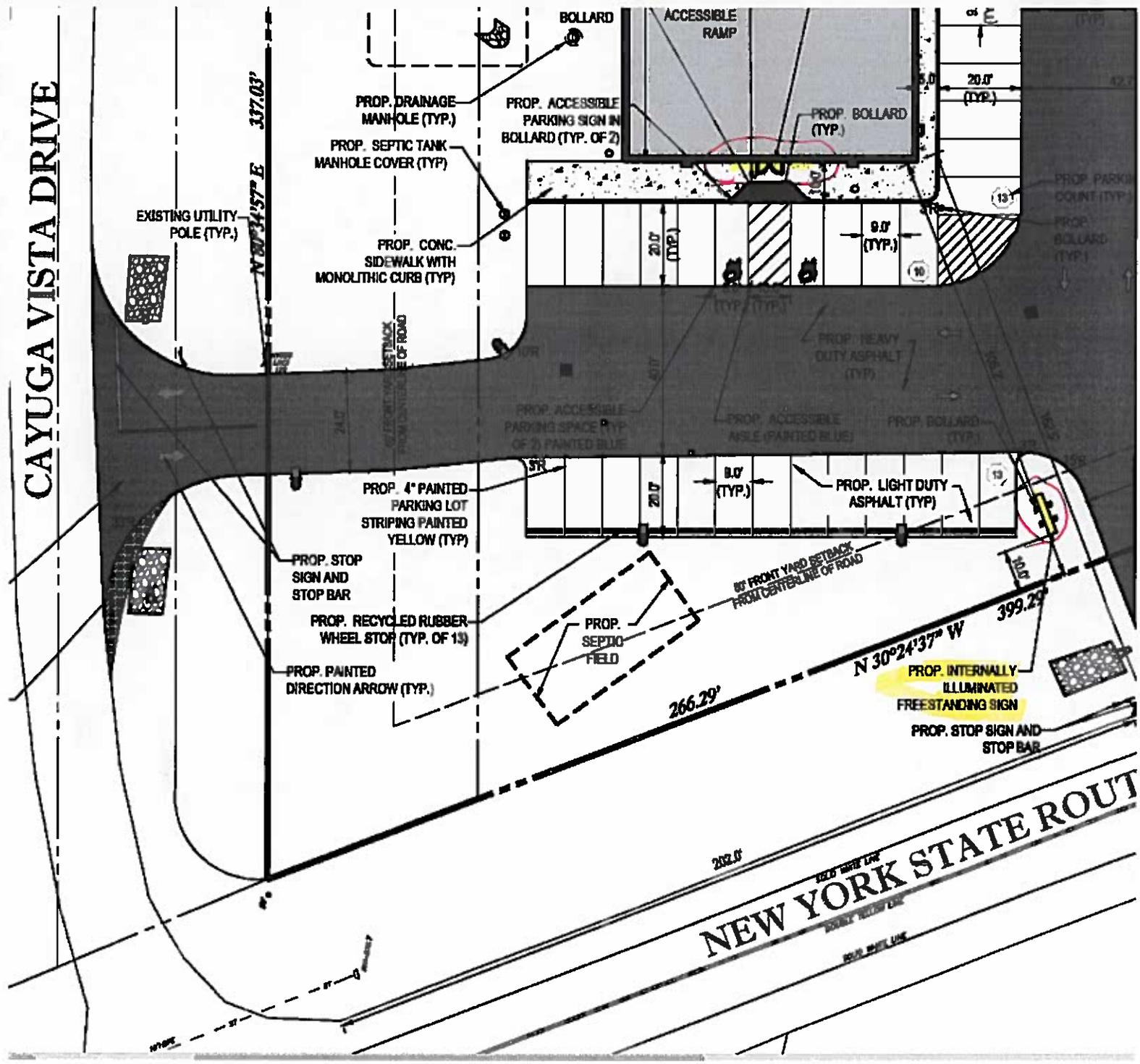
- I. Attach a copy of the current tax map showing the site of the proposed project relative to the location of farm operations identified in Item H above.

~~~~~  
**FARM NOTE**

Prospective residents should be aware that farm operations may generate dust, odor, smoke, noise, vibration and other conditions that may be objectionable to nearby properties. Local governments shall not unreasonably restrict or regulate farm operations within State Certified Agricultural Districts unless it can be shown that the public health or safety is threatened.  
~~~~~

Dennis Rattay 2-16-16
Name and Title of Person Completing Form Date

CAYUGA VISTA DRIVE



EXISTING UTILITY POLE (TYP.)

N 89°45'57\"/>

PROP. DRAINAGE MANHOLE (TYP.)
PROP. SEPTIC TANK MANHOLE COVER (TYP.)
PROP. CONC. SIDEWALK WITH MONOLITHIC CURB (TYP.)

BOLLARD
PROP. ACCESSIBLE PARKING SIGN IN BOLLARD (TYP. OF 2)

ACCESSIBLE RAMP

PROP. BOLLARD (TYP.)

20.0' (TYP.)

9.0' (TYP.)

PROP. ACCESSIBLE PARKING SPACE (TYP. OF 2) PAINTED BLUE

PROP. ACCESSIBLE ANGLE (PAINTED BLUE)

PROP. HEAVY DUTY ASPHALT (TYP.)

PROP. 4\"/>

PROP. STOP SIGN AND STOP BAR

PROP. RECYCLED RUBBER WHEEL STOP (TYP. OF 13)

PROP. PAINTED DIRECTION ARROW (TYP.)

PROP. SEPTIC FIELD

8' FRONT YARD SETBACK FROM CENTERLINE OF ROAD

266.29'

N 30°24'37\"/>

PROP. INTERNALLY ILLUMINATED FREESTANDING SIGN

PROP. STOP SIGN AND STOP BAR

202.0'

NEW YORK STATE ROUTE

BOHLER ENGINEERING

1100 WEST 10TH STREET
 SUITE 200
 ALBANY, NY 12206
 (518) 486-1000
 www.bohler-engineering.com

BOHLER ENGINEERING IS AN EQUAL OPPORTUNITY EMPLOYER. ALL RIGHTS RESERVED. THIS PLAN IS THE PROPERTY OF BOHLER ENGINEERING AND IS NOT TO BE REPRODUCED OR COPIED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF BOHLER ENGINEERING.

NO.	DATE	DESCRIPTION
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PRELIMINARY

DATE: 11/11/2011
 DRAWN BY: [Name]
 CHECKED BY: [Name]
 SCALE: AS SHOWN

SITE DEVELOPMENT PLANS

PRIMAX PROPERTIES, LLC

LOCATION OF SITE:
 495 BOYD AVE. CORNER WITH
 NEW YORK STATE ROUTE 28
 TOWN OF ALBANY
 STATE OF NEW YORK

BOHLER ENGINEERING

1100 WEST 10TH STREET
 SUITE 200
 ALBANY, NY 12206
 (518) 486-1000
 www.bohler-engineering.com

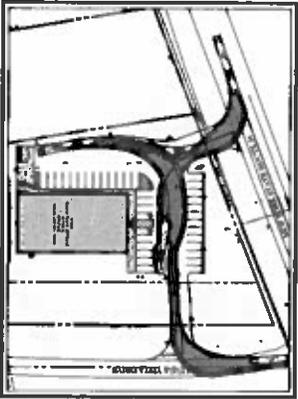
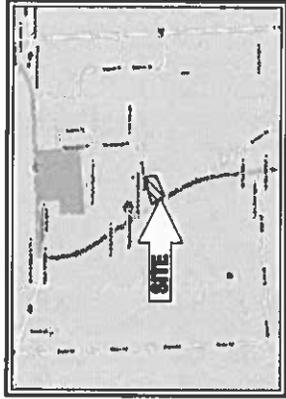
W.D. GOEBEL

PROFESSIONAL ENGINEER
 LICENSE NO. 10000
 STATE OF NEW YORK

SITE PLAN

SCALE: 1" = 100'

DATE: 11/11/2011



LAND USE / ZONING INFORMATION & NOTES

1. THE ZONING DISTRICT IS R-100.

2. THE ZONING DISTRICT IS R-100.

3. THE ZONING DISTRICT IS R-100.

4. THE ZONING DISTRICT IS R-100.

5. THE ZONING DISTRICT IS R-100.

6. THE ZONING DISTRICT IS R-100.

7. THE ZONING DISTRICT IS R-100.

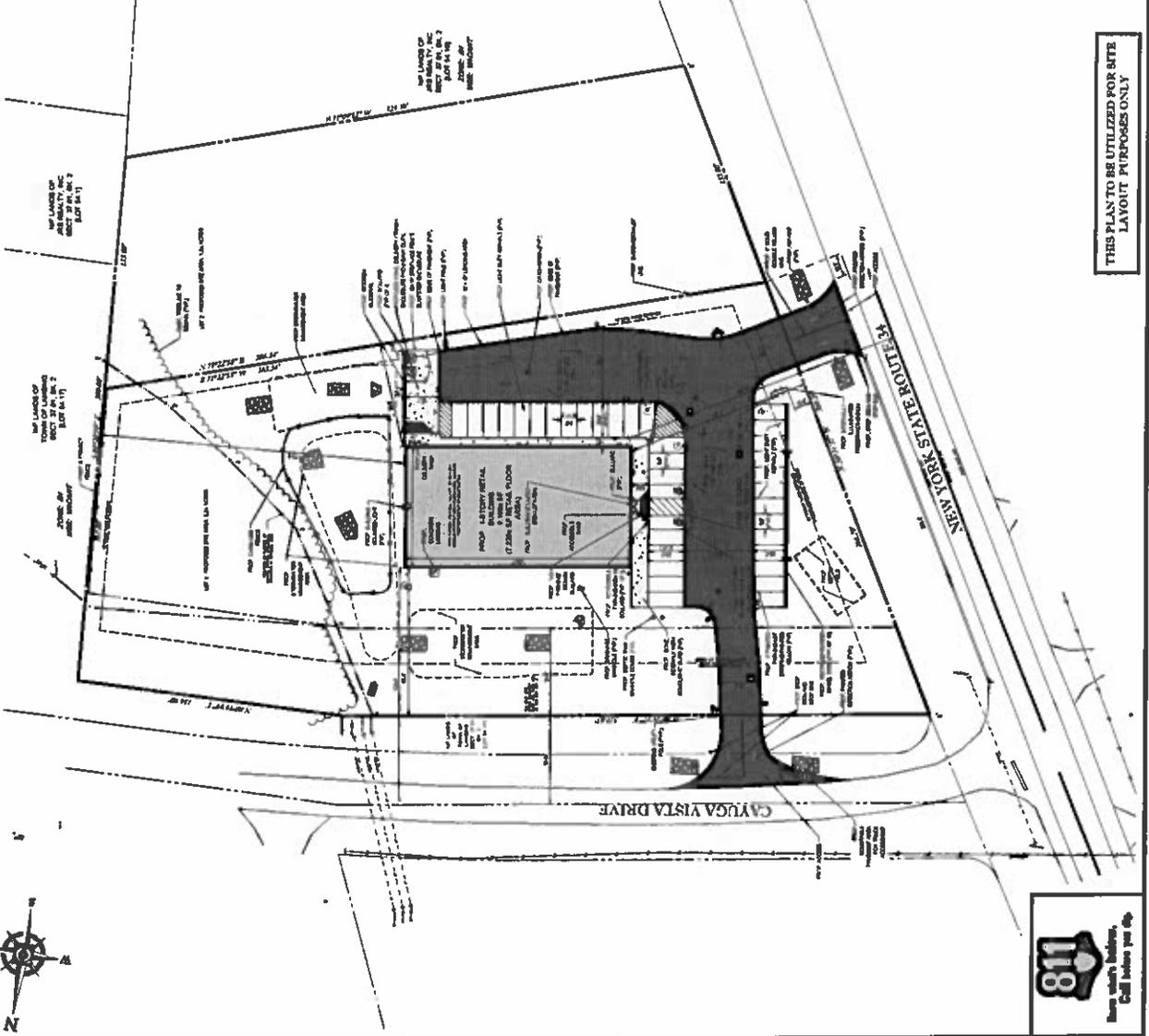
8. THE ZONING DISTRICT IS R-100.

9. THE ZONING DISTRICT IS R-100.

10. THE ZONING DISTRICT IS R-100.

ZONING ANALYSIS TABLE

PROPERTY	EXISTING ZONING	PROPOSED ZONING	CONFORMANCE
1. ZONING DISTRICT	R-100	R-100	COMPLIES
2. LOT AREA	10,000 SQ. FT.	10,000 SQ. FT.	COMPLIES
3. LOT COVERAGE	10%	10%	COMPLIES
4. SETBACKS	10 FT.	10 FT.	COMPLIES
5. HEIGHT	10 FT.	10 FT.	COMPLIES
6. SIGNAGE	10 FT.	10 FT.	COMPLIES
7. PARKING	10 FT.	10 FT.	COMPLIES
8. TRUCK TURNING	10 FT.	10 FT.	COMPLIES
9. FENCE	10 FT.	10 FT.	COMPLIES
10. OTHER	10 FT.	10 FT.	COMPLIES

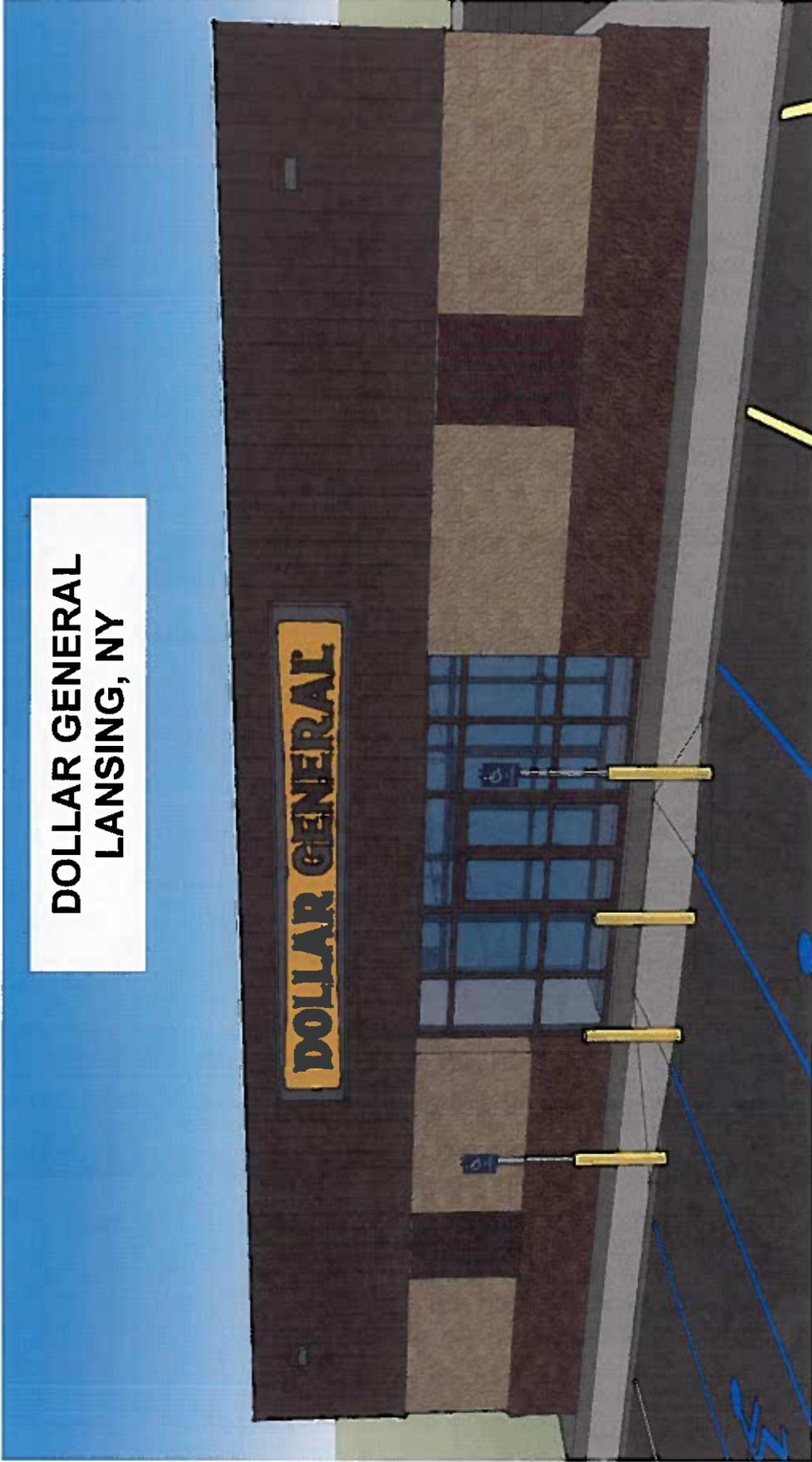


818

BOHLER ENGINEERING

Call before you dig

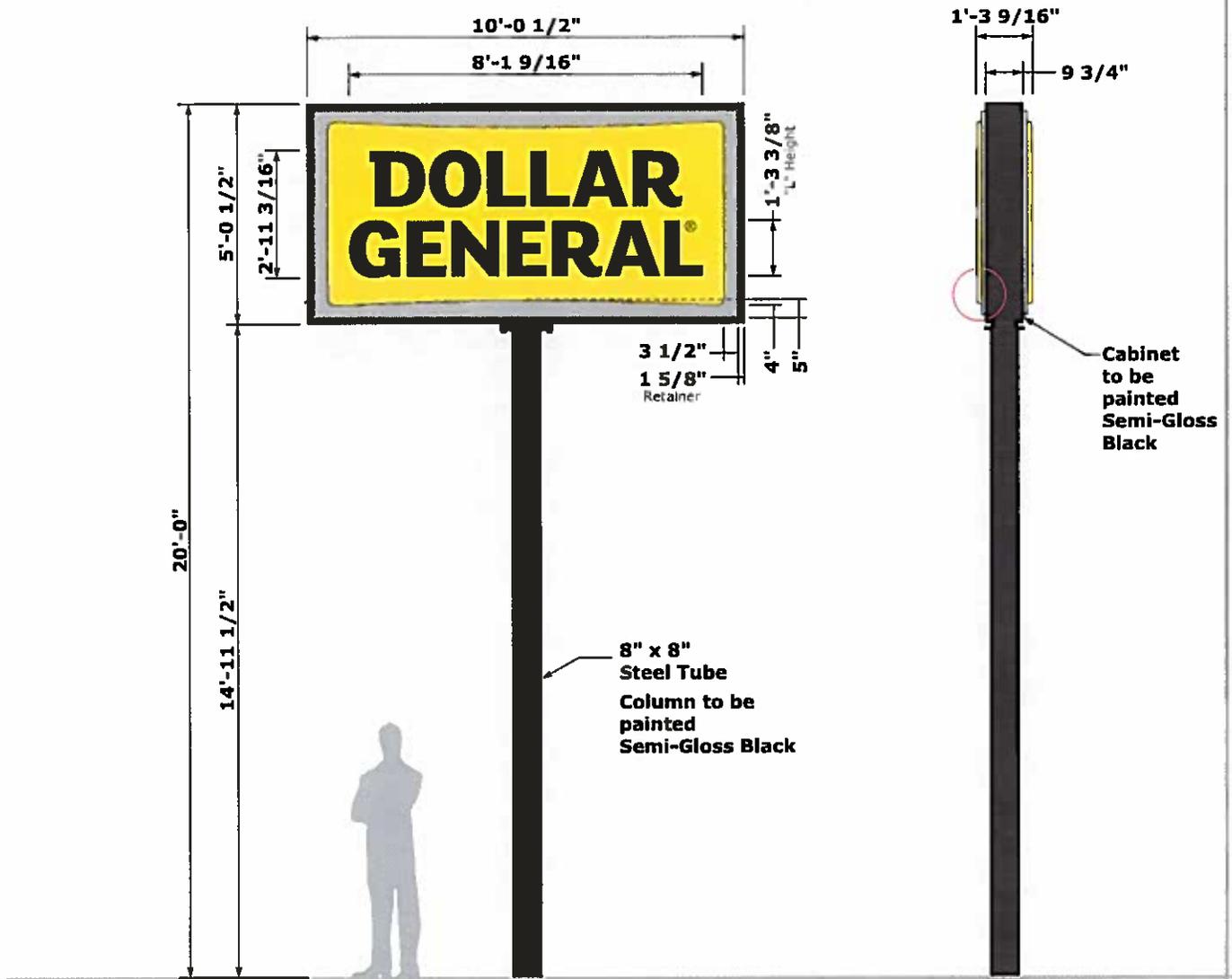
**DOLLAR GENERAL
LANSING, NY**



PRIMAX
CONSTRUCTION, INC.

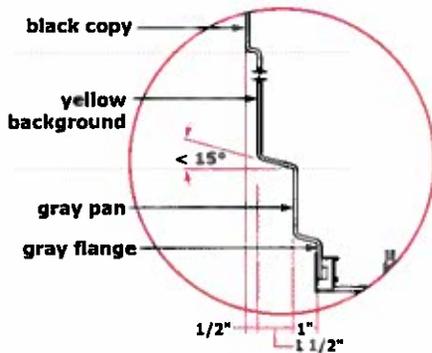
DOLLAR GENERAL
Save time. Save money. Every day.

P50



ELEVATION

SIDE



FACE EMBOSMENT DETAIL

SQUARE FOOTAGE
ACTUAL
50.63 sq. ft.

COLOR SPECIFICATIONS	
Yellow	match Spraylat C8-2633
Brushed Aluminum	match Spraylat FM-171
Black (Copy)	match Spraylat Black
Semi-Gloss Black (Metal)	match Black Polyurethane
Cool Gray	match PMS Cool Gray 5
Rock Bottom Gray	match Sherwin Williams SW7062
Green	match PMS 368C

DOLLAR GENERAL

File Name: Dollar General Cutsheets 2013

Project #: 13-0181

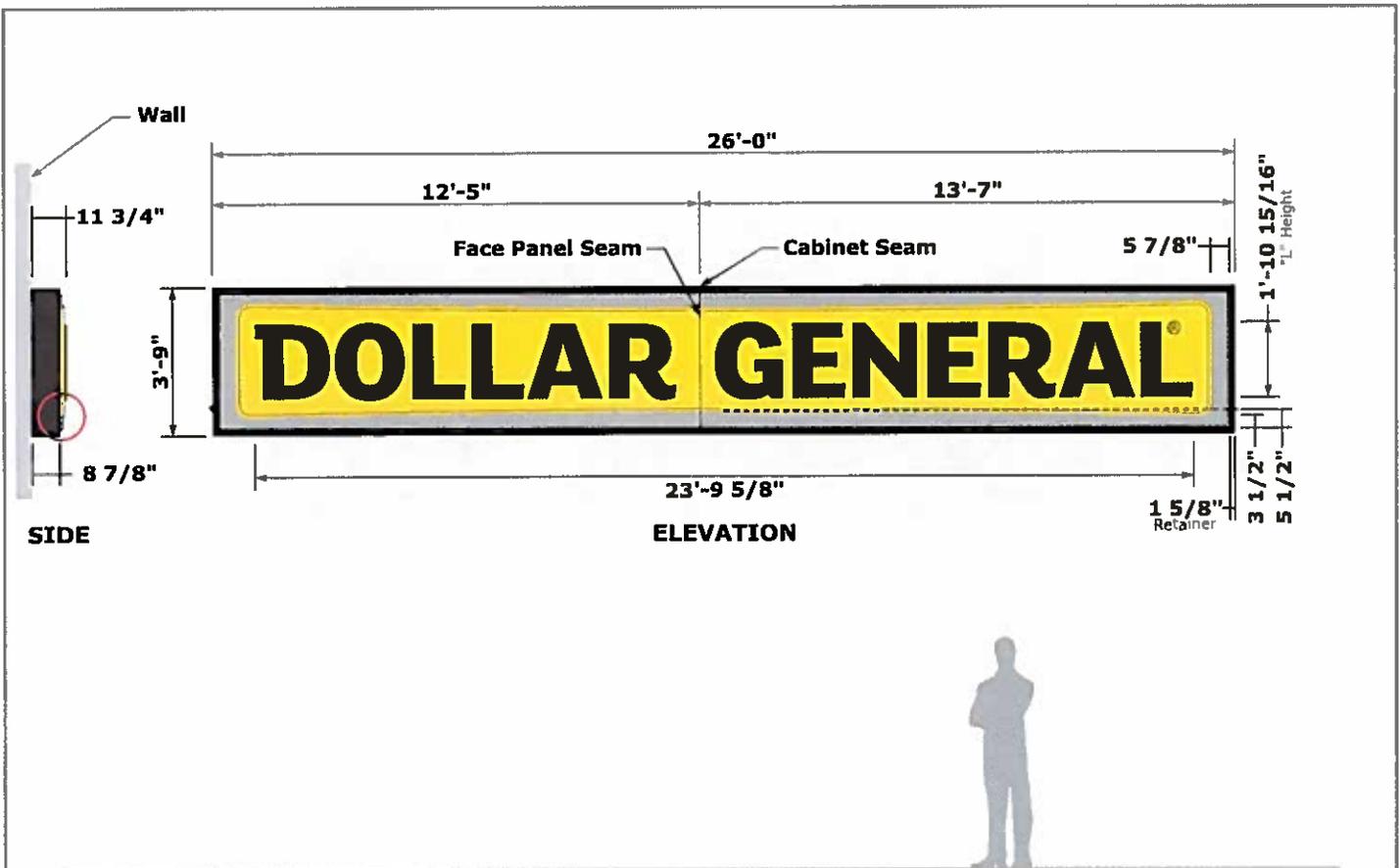
Page 5 of 33

Date: 08/30/2013

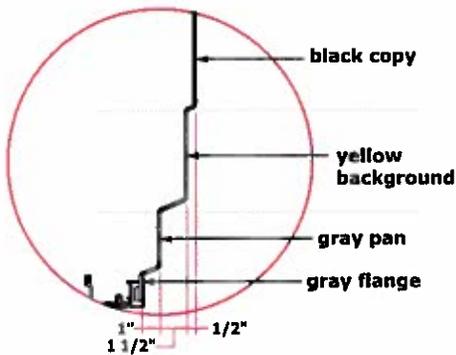
Approved By:



135 SOUTH DAVID LANE
KNOXVILLE, TN 37922
OFFICE: 865-539-4001
FAX: 865-539-0851
WWW.LINKENGR.COM



.150" clear UV polycarbonate (Spartech) pan formed face with Black copy over Spraylat C8-2633 Yellow on PMS Cool Gray 5 background. Cabinet to be painted Semi-Gloss Black.



FACE EMOSSMENT DETAIL

SQUARE FOOTAGE	
ACTUAL	
	97.50 sq. ft.

COLOR SPECIFICATIONS	
Yellow:	match Spraylat C8-2633
Brushed Aluminum:	match Spraylat FM-171
Black (Copy):	match Spraylat Black
Semi-Gloss Black (Metal):	match Black Polyurethane
Cool Gray:	match PMS Cool Gray 5
Rock Bottom Gray:	match Sherwin Williams SW7062
Green:	match PMS 368C

DOLLAR GENERAL

File Name: Dollar General Cutsheets 2013

Project #: 13-0181

Page 11 of 33

Date: 08/30/2013

Approved By:



135 SOUTH DAVID LANE
KNOXVILLE, TN 37922
OFFICE: 865-539-4001
FAX: 865-539-0851
WWW.LINKENGR.COM

DOLLAR GENERAL

DOLLAR GENERAL CORPORATION
100 MISSION RIDGE / GOODLETTSVILLE, TENNESSEE 37072-2170
PHONE 615-855-4641
FAX 615-855-4706
E-Mail kgarmon@dollargeneral.com

Owner consent for sign installation and permits

I, Kathy Garmon, being the owner/manager/representative of the business known as Dollar General and located at SEC Rt. 34 & Cayuga Vista Dr. do hereby certify that I am allowing Everbrite, Inc. (and / or their sub-contractor) to obtain permits and install signage at the below mentioned address.

Everbrite, LLC further agrees that all work will be done in compliance with all applicable laws, codes and ordinance, and any stipulations or restrictions listed on the permits.

Site address:

DOLLAR GENERAL
SEC Rt. 34 & Cayuga Vista Dr.
LANSING NY 14882

Signature Kathy Garmon
Name Kathy Garmon
Date: February 18, 2016

State of Tennessee
County of Davidson

The foregoing instrument was acknowledged before me this 18th day of February, 2016.
By Kathy Garmon as Sign Buyer for Dollar General Corporation who is personally known to me.

Francine Fort
Notary Public

Save time. Save money. Every day!



TOWN OF LANSING

tolcodes@twcny.rr.com

PH. (607) 533-7054

Box 186, 29 Auburn Road
Lansing, New York 14882
Sign Fee-\$40.00

TAX MAP # _____
DATE: _____

Sign Application

Applicant's Name: ALL BRITE SIGN / DENNIS RAMSAY
Mailing Address: PO BOX 62 City: ADDISON zip: 14801
Telephone#: () 607-359-2096
Property Owner: DDHAR GENERAL
Owner's Address: SEC 34 CAYUGA VISTA DR

Address of Project: SEC 34 CAYUGA VISTA DR
Description of work to be undertaken: INSTALLATION OF SIGNS
AS PER DRAWINGS ATTACHED

Estimated Construction Cost: 3,500.00
Contractor/Installer: ALL BRITE SIGN Phone: (607) 359-2096
Type of Sign: WALL / FREE STANDING
Free standing Sign Height: 20'
Sign Size (Dimensions): 5 X 10
Plot Plan/Location of sign: ATTACHED
Lighted Sign? YES
Highway ROW permission (State, County, Town) _____

The undersigned applies for a permit for the construction as described, in accordance with all provisions of all Laws or Regulations of the Town of Lansing, New York, or others having jurisdiction, and affirms that all statements and information given above are correct to the best of his knowledge and belief, and hereby authorizes the Code Enforcement Officer of the Town Lansing, or his designee, to conduct on site inspections to ensure that work is carried out in accordance with all applicable codes.

Owner's Signature: Dennis Ramsay

(Office Use Only- Do Not Fill Out Below Dotted Line)

Occupancy Class: _____ Construction Type: _____ Hazard: _____

<u>CONDITIONS & PERMITS</u>	<u>VERIFIED OR ISSUED</u>
Town Zoning _____	_____
Workers' Compensation _____	_____

Sign Permit: () Approved Received Permit Fee of: \$ _____

() Denied Sign Permit # _____

Reason: _____

STATE OF NEW YORK
WORKERS' COMPENSATION BOARD

CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

<p>1a. Legal Name & Address of Insured (Use street address only)</p> <p>Julie Rattay DBA All Brite Sign & Service PO Box 62 Addison, NY 14801-0062</p> <p>Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy)</p>	<p>1b. Business Telephone Number of Insured 607-359-2096</p> <p>1c. NYS Unemployment Insurance Employer Registration Number of Insured</p> <p>1d. Federal Employer Identification Number of Insured or Social Security Number 46-0911880</p>
<p>2. Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder)</p> <p>Town of Lansing Box 186, 29 Auburn RD Lansing, NY 14882</p>	<p>3a. Name of Insurance Carrier NGM Insurance Company</p> <p>3b. Policy Number of entity listed in box "1a" WCU7053K</p> <p>3c. Policy effective period <u>07/19/15 to 07/19/16</u></p> <p>3d. The Proprietor, Partners or Executive Officers are <input type="checkbox"/> included. (Only check box if all partners/officers included) <input type="checkbox"/> all excluded or certain partners/officers excluded.</p>

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New York State Workers' Compensation Law. (To use this form, New York (NY) must be listed under **Item 3A** on the INFORMATION PAGE of the workers' compensation insurance policy). The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The Insurance Carrier will also notify the above certificate holder within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.

Please Note: Upon the cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

Approved by: Susan Bechard

Approved by: 

Title: Service Center Representative 2/18/2016
(Date)

Telephone Number of authorized representative or licensed agent of insurance carrier: 866-204-5325
Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue it.

