



ARCHITECTURAL REVIEW BOARD VILLAGE OF WASHINGTONVILLE

9 FAIRLAWN DRIVE, WASHINGTONVILLE, NY 10992
OFFICE: 845-496-3221 | FAX: 845-496-1990

APPLICATION

RECEIVED
MAR - 5 2025

BY: [Signature]

All applications, drawings and documents must be submitted to Village Hall along with an electronic.

PDF Email: MSchiffmacher@washingtonville-ny.gov &

Lmccormack@washingtonville-ny.gov

Applicants must include all sign details and specifics on drawings.

PLEASE DO NOT ORDER SIGNS BEFORE APPROVED

PROPERTY INFORMATION:

Business Name: Amada's Kitchen LLC
Address: 6 depot Street Washingtonville NY 10992 SUITE 106 & 107
Section: 113 Block: 33 Lot(s): 1
Zoning District: _____ Dimensions (Or Acreage) of Parcel: _____

ARE YOU REQUESTING A SIGN APPLICATION FOR A DOWNTOWN STRUCTURE WITH MULTIPLES BUSINESSES: Yes: ☒ No: ☐

If **YES please follow **DOWNTOWN** guidelines when completing application.

SIGNAGE REQUIREMENTS FOR DOWNTOWN MULTI - BUSINESS STRUCTURES:

The Village Board has standardized signage for downtown structures with multiple businesses.

Please follow these guidelines:

- **Colors:** **BACKGROUND** in Benjamin Moore Monterey White HC-27, **FONT** in Historical Black HC-190.
- **Shape:** Rectangular.
- **Lighting:** Gooseneck lighting in **BLACK**.

SIGNAGE REQUIREMENTS FOR DOWNTOWN FREESTANDING and NON- DOWNTOWN STRUCTURES:

Please follow these guidelines:

- **Colors:** Select 2 **COLORS** from attached Historical Color Pallet
- **Color Pallet Selected** (Please complete attached form): ☐ Yes ☐ No

SIGNAGE REQUIREMENTS FOR BROTHERHOOD PLAZA, FULTON SQUARE, WASHINGTONVILLE PHARMACY PLAZA:

Must adhere to current signage regulations for your location.

PHONE NUMBERS & HIGH OR SEMI-GLOSS FINISHES OF ANY KIND ARE NOT PERMISSABLE

REQUEST REVIEW OF:

☐ **FAÇADE**

☒ **SIGN** ☐ **WINDOW SIGNS** must use **FONT** in Benjamin Moore Monterey White HC-27 **SIGNS** can **ONLY** cover 25% of the area.

☐ **LIGHTING** | **APPLICANTS INCLUDING FIXTURES | SEE ATTACHED GUIDELINES**

Fixture Selection Included: ☐ Yes ☐ No

Amada's

G depot.

☐ OTHER: _____

Project Description: Black & white

Sign Shape & Dimensions: Rectangular

Sign Materials: wood

Hardware used: Hooks

How will the sign be mounted: Hanging mounted with hooks

APPLICANT | OWNER INFORMATION:

Applicant: _____

Business Name: _____

Phone #: _____ Alt. Phone #: _____

Address: _____ Email Address: _____

Property Owner: _____

Phone #: _____ Alt. Phone #: _____

Address: _____ Email Address: _____

Design Professional: _____

Phone #: _____ Alt. Phone #: _____

Address: _____ Email Address: _____

Contact Person: Magdalena Sanchez

Phone #: 845-238-6406 Alt. Phone #: _____

Address: 1 Nicoll St. WASHINGTON Email Address: amadasKitchen@gmail.com
NY 10002

FEES: ARB APPLICATION: \$100.00 ~~\$50.00~~

Amount Rec'd: \$ 50.00 Check/MO Number: 1193

TD
ARB Chairperson Approval

4/10/25
Date

[Signature]
Applicant Signature

3/5/2025
Date

OFFICE USE ONLY

Building Inspector sign reviewed: [Signature] (Initial's)

Revised Date: February 25, 2025, Revised By: MS