



Development & Neighborhood Services Department
 100 S. Myrtle Avenue, Suite 210
 Clearwater, FL 33756
 Telephone: (727) 562-4567 Fax: (727) 562-4576
 www.myclearwater.com

SIGN PERMIT APPLICATION

SGN _____

SIGN PERMIT SUBMITTAL REQUIREMENTS:

Site Plan with the following items:

- (a) Location of the sign in relation to property lines, public rights-of-way, easements, buildings, and other signs on the property including dimensions. (Freestanding signs must be a minimum of five (5) feet from any property line.)
- (b) Lot frontage on all street rights-of-way.

ADDITIONAL SIGN PERMIT REQUIREMENTS:

- (c) Inventory of all existing signs on the same property and/or building on which the sign is to be located, indicating the number, type, use e.g. property identification, business identification, etc.) location and surface area. (If "none", so indicate);
- (d) Maximum and minimum height of the sign, as measured from finished grade;
- (e) Dimensions of the sign's supporting members;
- (f) For illuminated signs, the type, placement, intensity and hours of illumination. (Not more than five (5) foot-candles of light intensity for commercial signs.)
- (g) Dimensions and elevations (including the message and color(s)) of the sign; and
- (h) Construction and electrical specifications, for the purpose of enabling determination that the sign meets all applicable structural and electrical requirements of the Building and National Electric Codes. (Indicate if UL rated.)

*All applications for signs shall include detail drawings showing how the sign is to be constructed and secured. All signs greater than **32 square feet** in size shall have structural drawing signed and sealed by licensed Florida engineer or architect.

ALSO, please note that wind load requirements should conform to the 1997 edition of the Southern Standard Building Code.

PROJECT ADDRESS: _____

A. APPLICANT, PROPERTY OWNER AND AGENT INFORMATION: (Code Section 4-1001)

APPLICANT (Business) NAME: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____ **FAX NUMBER:** _____

PROPERTY OWNER(S): _____

(MUST INCLUDE ALL OWNERS)

TELEPHONE NUMBER(S): _____

AGENT NAME (Contact Person): _____

(Please check if AGENT is Contractor)

STATE LICENSE NUMBER OF CONTRACTOR: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: _____ **FAX NUMBER:** _____

CELL PHONE NUMBER: _____ **E-MAIL ADDRESS:** _____

B. ALL EXISTING SIGNAGE DEVELOPMENT INFORMATION: (include the number and size of each type of sign; attach photos)

_____ Attached Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.
_____ Freestanding/Pole Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.
_____ Monument Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.

C. PROPOSED DEVELOPMENT INFORMATION: (Code Section 4-1001)

SPECIAL PLANNING AREA (if applicable):

STREET ADDRESS:

LEGAL DESCRIPTION:

PARCEL NUMBER:

PARCEL SIZE: _____ LOT FRONTAGE (along street right-of-way) : _____ ft.

(acres, square feet) Corner Lot LOT FRONTAGE (along second street right-of-way): _____ ft.

BUILDING FACADE FACING STREET: (Height) _____ ft. X (Width) _____ ft. = _____ Square Feet

PROPOSED SIGNAGE INFORMATION: (include the number and size of each type of sign) Electrical Permit required

_____ Attached Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.
_____ Freestanding/Pole Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.
_____ Monument Sign(s)	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.	_____ Sq. ft.

Corner Lot: (bldg. façade facing second street] (Height) _____ ft. X (Width) _____ ft. = _____ Square Feet

TOTAL VALUE OF ALL NEW SIGNAGE: \$ _____

Statement of Authorization - Any application form which is signed by an individual other than the property owner shall be accompanied by a notarized statement of authorization consenting to the sign placement or, if the property or building upon which the sign is to be located is leased, a copy of the executed lease shall accompany the application form. In the event the building or property is leased, the application form must be signed by the lessor or accompanied by a notarized statement of authorization signed by the lessor consenting to the sign placement. (Not required for portable signs/face changes or signs approved by variances.)

CERTIFICATION

I certify that all information submitted on this application and attachments thereto are true and correct to the best of my knowledge and belief. I understand that any inaccurate information may result in revocation of the sign permit and removal of any sign erected pursuant to such permit. I will be responsible for the installation of the subject sign in accordance with the sign regulations of the City of Clearwater.

I acknowledge that all nonconforming signs are subject to the amortization provisions contained in Section 44.55 of the City of Clearwater Code of Ordinances and must be brought into compliance before October 13, 1992. Furthermore, I understand that any investment made in or to a nonconforming sign during the amortization period, including but not limited to message changes, shall not constitute grounds for noncompliance or compliance later than October 13, 1992.

Print Name of Property Owner (or authorized representative)

Signature of Property Owner (or authorized representative)

(FOR OFFICE USE ONLY BELOW)

Atlas Page _____	Zoning District _____	<input type="checkbox"/> Comprehensive Sign Program Approval	
Signage Permitted by Code			
<input type="checkbox"/> Comprehensive Sign Program Required		<input type="checkbox"/> \$300 Application Fee Date: _____ Receipt # _____	
Freestanding	Square Feet	Freestanding	Square Feet
Monument	Square Feet	Monument	Square Feet
Attached (wall signage)	Square Feet	Attached (wall signage)	Square Feet
Zoning Approval		Zoning Approval	
Date	/ /	CSP Approval Date	/ /

Traffic Eng. Approval		<input type="checkbox"/> See Attached Development Order
Building Approval		<input type="checkbox"/> Landscaping Required Square Feet _____