

Total Cost of Sign Improvement: \$ \_\_\_\_\_

**TBS #** \_\_\_\_\_

NAME OF BUSINESS \_\_\_\_\_

LOCATION \_\_\_\_\_

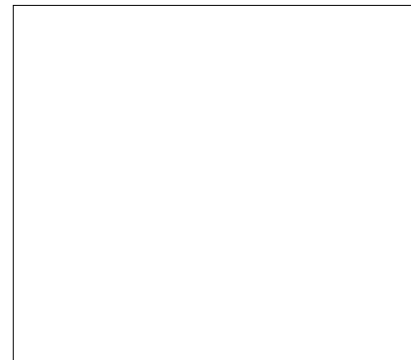
Bldg # \_\_\_\_\_ Unit #(s) \_\_\_\_\_ Subdivision / Center Name: \_\_\_\_\_

PARCEL I.D. NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email Address: \_\_\_\_\_


 Mailing Address: \_\_\_\_\_  
*Street Address* *City* *State* *Zip*
**Contractor's License No:** \_\_\_\_\_ **Contact:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

 Mailing Address: \_\_\_\_\_  
*Street Address* *City* *State* *Zip*

 Email Address: \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**Owner of Off-Site Sign :** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

 Email Address: \_\_\_\_\_ **Fax #:** \_\_\_\_\_

**A. TYPE OF IMPROVEMENT**

18 SIGN

**CLASS OF BUILDING**

05 MULTI FAMILY \_\_\_\_\_units

07 HOTEL, MOTEL \_\_\_\_\_units

08 DORMITORY \_\_\_\_\_units

09 WAREHOUSE

13 SUBDIVISION

15 BUSINESS

17 CHURCH, OTHER RELIGIOUS

18 INDUSTRIAL

20 SERV. STATION, REP GARAGE

21 HOSPITAL, INSTITUTIONAL

22 OFFICE, PROFESSIONAL

24 PUBLIC UTILITY

25 SCHOOL, LIBRARY, EDUCATION

26 STORES, MERCANTILE

28 DAY CARE

30 MULTI - USE

33 OFF-SITE ADVERTISING SIGN

37 RESTAURANTS

**B. OWNERSHIP**
 PRIVATE

 PUBLIC

 CANOPY ROADS

 HISTORICAL

 PUD

 DOWNTOWN ZONING AREA

**TYPE OF SIGN:**

- Permanent
- On-Site
- Off-Site
- Directional

**CHECK ALL THAT APPLY:**

- New
- Addition
- Alteration
- Relocation
- Other \_\_\_\_\_
- Ground
- Wall
- Mansard
- Projecting
- Roof
- Illuminated
- Non-Illuminated
- Revolving
- New Electric
- Existing Electric

I understand that issuance of this permit shall in no way prevent the Building Official from later declaring said sign to be non-conforming if upon further review of information submitted with the application, or of newly required information, the sign is found not to comply with the requirements of the City of Tallahassee, Land Development Code. By signing of this permit, I agree to indemnify and hold harmless the City of Tallahassee for all damages, demands or expenses of every character, which may in any manner be caused by the sign or sign structure.

Contractor Signature or Contractor's Authorized Agent \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

# APPLICATION CHECKLIST

- Owner's affidavit, with owner's signature notarized, designating a licensed contractor as the agent.
- Letter of approval from property owner and a copy of the lease stating your legal right to place a sign on a parcel if off-site advertising sign, or off-site directional sign.
- Two (2) Sets of Plans in accordance with TLDC 7-33(a)(4) "Plans indicating the scope and structural detail of the work to be done, including details of all connections, guy lines, supports and footings, and materials to be use." including:
  - Dimensions of sign
  - Elevation of sign
  - Means of attachment of sign
- Two (2) copies of site plan showing the following:
  - Location of proposed and existing signage.
  - Dimensions of property frontage, building frontage/bay(s)
  - Square footage of proposed and existing signage.
- Ground signs greater than 100 sq. ft require two (2) sets of signed and sealed engineered drawings, indicating compliance with the Florida Building Code.
- Electrical Permit for Illuminated Sign Electrical Connection   TBE
- Lighting (illumination) details for sign including existing and / or proposed electric circuit, existing and / or proposed disconnect or switch.
- Will any trees be affected by the installation of sign?   **Yes**               **No**

PROPERTY FRONTAGE			
	(STREET NAME)	(CLASSIFICATION)	(FEET)
	(STREET NAME)	(CLASSIFICATION)	(FEET)
BUILDING FRONTAGE			
	(STREET NAME)	(CLASSIFICATION)	(FEET)
	(STREET NAME)	(CLASSIFICATION)	(FEET)

<u>SIZE</u>	
PROPOSED AREA _____ (sf)	AREA OF EXISTING SIGNS _____ (sf)
ELEVATION OF SIGN _____ (lf)	TOTAL AREA _____ (sf)
TOTAL ALLOWABLE AREA _____ (sf)	AREA REMAINING _____ (sf)

**Off-Site Sign Information must be completed in its entirety.**

**OFF-SITE SIGN INFORMATION:**       NEW       ALTERATION

**OFF-SITE SIGN COMPANY:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ST:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** (    ) \_\_\_\_\_ **CONTACT:** \_\_\_\_\_

**TYPE OF SIGN: (CHECK ALL THAT APPLY)**

- STATIC                                       TRIVISION                                       VARIABLE MESSAGE  
 SINGLE FACE                                       DOUBLE FACE

<b>Sign Face Orientation (Street Name)</b>	<b>Face 1</b>	<b>Face 2</b>

**Distance to next off-site sign (measured in both directions):**

\_\_\_\_\_ • \_\_\_\_\_  
DISTANCE (FT)                                      DISTANCE (FT)

**CERTIFICATE OF REMOVAL NUMBERS**


# STAFF USE ONLY

**TREE PROTECTION REQUIRED:**       YES       NO

**OTHER PERMITS REQUIRED:**                       Electric       Environmental

APPLICATION \_\_\_\_\_ PD                      GROUND SIGN \_\_\_\_\_ (\$1.34 sq ft)  
 WALL SIGN \_\_\_\_\_ (\$0.67 sq ft)                      OTHER \_\_\_\_\_

APPLICABLE BLDG CODE EDITION:                      Training Surcharge \$ 2.50  
 **FL Bldg Code** \_\_\_\_\_ **Edition**                      State Surcharge: \$ \_\_\_\_\_

**BALANCE DUE \$** \_\_\_\_\_

Additional notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Required Review	Date of 1st Rev	Date of 2nd Rev	Date of 3rd Rev	Final Approval
<input type="checkbox"/> Zoning				ZNG
<input type="checkbox"/> Environmental				ENV
<input type="checkbox"/> Electrical				ELEC
<input type="checkbox"/> Building				BLDG