SG MI
AW
Office Use

CITY OF FLORIDA CITY

Building and Zoning Department
404 West Palm Drive Florida City, FL 33034
305-247-8222

SIGN PERMIT APPLICATION

IF SUBSIDIARY, PROVIDE MASTER PERMIT NUMBER HERE:

Location of Improvements

Address _____ Unit _____
Folio _____

Use of Property

Current Use _____
Description of Work _____
_____
Value of Work _____

Architect/ Engineer

Name _____
Address _____
City _____ St ____ Zip _____
Phone _____

Contractor Information

Cert.No. _____
Contractor Name _____
Qualifier Name _____
Qualifier SS 999-99- _____
Address _____
City _____ St ____ Zip _____
Phone _____

Owner Information

Name _____
Address _____
City _____ St ____ Zip _____
Phone _____

Type of Improvements

( ) New Construction ( ) Alteration Interior ( ) Change of Contractor ( ) Repair ( ) Repair due to Fire ( ) Renewal

Building Sign (Sq. Ft.)	
Pole Sign (Sq.Ft.)	
Change Out (Sq. Ft.)	
Awning (Sq. Ft.)	
Awning with Lettering (Sq. Ft.)	

Note: 2 copies of the Property Survey or Site Plan must be submitted showing the location of all existing and proposed signs. Square footage for signs must be listed individually and totaled.

Other _____
_____

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that seperate permits are required for Building Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters and Roofing work and there may be additional permits required from other

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate.

WARNING TO OWNER: If your job cost exceeds $2500.00 you must file a Notice of Commencement with the Clerk of the Courts in Miami-Dade County. Failure to do so may result in you paying twice for ther improvements to your property. If you intrend to obtain financing, consult your attorney or lender before recording your Notice of Commencement.

Signature of Owner or Owner's Agent
Print Name _____

Sworn to and subscribed to me this ____ day of _____ 20
Personally known ( ) Produced Identification ( )
Type of Identification Produced _____

Signature of Qualifier
Print Name _____

Sworn to and subscribed to me this ____ day of _____ 20
Personally known ( ) Produced Identification ( )
Type of Identification Produced _____

Revision 3/2011