



Charlotte County
Community Development Department
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 Port Charlotte FL 33948-1074
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BuildingConstruction@CharlotteCountyFL.gov
PlanningZoning@CharlotteCountyFL.gov
www.CharlotteCountyFL.gov

Office Use Only
 Permit Application Number: _____

Application Date: _____

Staff Initials: _____

APPLICATION FOR SIGN PERMIT
 (Erect, Alter, Repair or Move)

Business Owner's Name: _____ Date: _____

Address of Sign: _____ City/State/Zip Code: _____

Tax Folio (Parcel) ID: _____ OR Lot/Block/Subdivision: _____

SIGN TYPE (please check): Primary Pole Sign Primary Wall Sign

SIGN DESCRIPTION (please check): Marquee Projection Ground Roof

Wall Other _____ Non-illuminated Illuminated

MATERIAL: Face: _____ Frame: _____ Support: _____

Single Face: _____ Double Face: _____ Panel Size: _____

SIZE: Total Gross Face Area of Sign in Square Feet: _____ **FOOTING SIZE:** _____

Description of Lettering on Face: _____

HEIGHT: Lower Edge: _____ Upper Edge: _____ Zoning District: _____

TOTAL COST OF PROJECT \$ _____

I hereby agree that if this application is approved and a sign permit is issued, I will comply with all Building Code requirements and Zoning regulations adopted by Charlotte County for signs.

 Sign Contractor's Company Name

 License Number

 Qualifier's Printed Name

 Phone

 Qualifier's Signature

 Email

****Note: A recorded Notice of Commencement may be required in the Permitting Office if project is over \$2500****

Sketch of Sign	Site Plan Sketch

PROPERTY OWNER'S CONSENT

I, _____, property owner of _____
 Printed Name of Property Owner Address

do hereby give _____ permission for permitted work at this location.
 Sign Contractor's Name

 Property Owner's Address City/State/Zip Code Property Owner's Phone

PROPERTY OWNER & NOTARY SIGNATURES

 Signature of Property Owner
 State of _____, County of _____

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this ____ day of _____ 20____, by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

 Signature of Notary Public Printed or Stamped Name of Notary Public

SIGNAGE ALLOTMENT CALCULATIONS

Owner must provide the information below:

- 1. Total property frontage in Linear Feet: _____
- 2. Total building or unit frontage in Linear Feet: _____
- 3. **EXISTING SIGNAGE.** Please provide number, location and square footage of all **existing** signs or advertising devices on the property (square footage = length x width).
 - a. Sq. ft. _____ Type: _____ Location _____
 - b. Sq. ft. _____ Type: _____ Location _____
 - c. Sq. ft. _____ Type: _____ Location _____
 - d. Sq. ft. _____ Type: _____ Location _____
- 4. **PROPOSED SIGNAGE.** Please provide the following information for all **proposed** signs or advertising devices on the property.
 - a. Sq. ft. _____ Type: _____ Location _____
 - b. Sq. ft. _____ Type: _____ Location _____
 - c. Sq. ft. _____ Type: _____ Location _____
 - d. Sq. ft. _____ Type: _____ Location _____

Please add additional signs on a blank sheet of paper.

Office Use Only:

Site Inspection Shows How Many Signs On-Site _____

Signage Allotment: _____ Total Allotment Used: _____

Signage Allotment Leftover: _____ Inspected: _____

Application for Construction Permit

Fee Simple Titleholder Name (if not Owner): _____

Address: _____ City/State/Zip Code: _____

Bonding Company Name: _____

Address: _____ City/State/Zip Code: _____

Architect/Engineer Name: _____

Address: _____ City/State/Zip Code: _____

Mortgage Lender Name: _____

Address: _____ City/State/Zip Code: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet the standards of all laws regulation construction in this jurisdiction. The undersigned applicant for this permit does hereby certify that he/she has or will prior to the performance of any work in connection with the authorization granted under this permit comply with the provision of the Florida Worker's Compensation Act of Employers Liability Insurance, the Social Security Act, the Florida Child Labor Laws and all other applicable safety and labor laws of the state. Violations will invoke severe penalties.

Owners Affidavit: I hereby certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

NOTICE: In addition to the requirement of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state, or federal agencies.

Owner/Agent, Contractor and Notary Signatures

<p style="text-align: center;"><input type="checkbox"/> Owner / <input type="checkbox"/> Agent (please check) Signature</p> <p>State of _____, County of _____</p> <p>The foregoing instrument was acknowledged before me, by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization, this ____ day of _____ 20____,</p> <p>by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.</p> <p>_____ Notary Signature</p> <p>_____ Notary's Printed Name</p> <p>_____ Commission Number</p>	<p style="text-align: center;">_____ Contractor Signature</p> <p>State of _____, County of _____</p> <p>The foregoing instrument was acknowledged before me, by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization, this ____ day of _____ 20____,</p> <p>by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.</p> <p>_____ Notary Signature</p> <p>_____ Notary's Printed Name</p> <p>_____ Commission Number</p>
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