



CITY OF DADE CITY

Proud Heritage. Promising Future.

TEMPORARY SIGN PERMIT APPLICATION

PROPERTY INFORMATION

JOB ADDRESS:

BUSINESS NAME(S): _____

PROPERTY OWNER NAME: _____

APPLICANT NAME: _____

PHONE NUMBER: _____ EMAIL: _____

SIGNAGE INFORMATION

1. TYPE: _____ SIGN AREA (SQ. FT.): _____
2. HEIGHT OF SIGN (IF FREE STANDING): _____
3. TOTAL NUMBER OF SIGNS ON PROPERTY: _____
4. DATE SIGN IS TO BE INSTALLED: _____
5. DATE SIGN IS TO BE REMOVED: _____

FRONTAGE ON (street name): _____ AND LENGTH: _____

SUBMITTAL REQUIREMENT: Provide one copy of construction plans/drawings that include a **Site Plan** (proposed sign location), And a picture of the proposed temporary sign.

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 the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. Please be advised that the issuance of a sign permit does not authorize occupancy or use of the property.**

Signature of Applicant: _____ Date: _____

STAFF USE ONLY

APPROVAL DATE: _____		DATE SIGN IS TO BE REMOVED: _____
ZONING DISTRICT: _____	CRA DISTRICT: YES OR NO _____	NOTES: _____
STAFF SIGNATURE: _____		

Established 1889