



Application for Outdoor Advertising sign Development Permit

Name of the Applicant or Company_____

Address of record_____

City_____ State_____ Zip code_____

Sign Location Information

County_____ FDM Zoning_____

Parcel ID#_____

Do you own this site or lease the site ?(circle one) Own Lease

Location is on/off Road_____

Sign will be facing (circle one) North South East West

Sign will be on the (circle one) North South East West side of the road

Sign Location Address_____

Distance (in feet) to closest part of the sign to the road_____

Sign Description

Sign is (check one) ____existing____Proposed

Facing height in feet_____Facing width in feet_____Total Sq Feet_____

Changeable Facing ____Yes____No if yes describe_____

Configuration of the sign _____Single facing (one side____OR Multiple facing (a separate application is required for each facing)

Sign Total Structure Height _____Will Sign be externally lighted____Yes____No

Will the sign obstruct any roadway or create a roadway hazard? ____Yes____No

Is application being submitted as the result of a Notice of Violation or Jurisdictional Change of Road? ____Yes____No

I, hereby certify that the information given and the statements made in this application are true and that I have received, in writing, permission from the landowner or other person in lawful possession of the site to erect an outdoor advertising sign at the location designated in this application.

I understand that if a building permit is submitted in lieu of local government permission sign-off on this application, I am certifying that the local government has approved the placement of the proposed sign designated in this application, or in the case of an existing sign designated in this application, that the local government has not provided notice that the sign is illegal, and that the local government has taken no action to cause the sign to be removed.

I understand that submission of false or misleading information of material consequence on this application or attachments thereto, or any other violation of Chapter 479, F.S., or Chapter 14-10, F.A.C., unless corrected within 30 days of notification by the Department, will result in revocation of this permit.

I understand, pursuant to s. 479.106(5), F.S., that the Department shall not issue a permit for the cutting, trimming, or removal of trees or vegetation planted within the state right of way as part of a beautification project approved prior to the submission date of this application. I understand, pursuant to s. 14-10.057(1)(e)10., F.A.C., that a beautification project is approved when it is specifically identified in the Department's five-year work program, is a permitted landscape project, is part of an executed agreement between the Department and a local government, or has been approved in writing by the Department for installation at a later date by a local government.

I understand that the established view zone as defined in s. 479.106(6), F.S. will automatically be assigned because of this application being approved. Pursuant to s. 479.106(6), F.S., a view zone other than what is provided must be established.

I understand I can only have 1 sign

I understand the sign must be located on the parcel list only.

I understand the sign must not exceed 16 sq ft in area

Sign must meet the set backs from any property line a minimum of 10 ft

I understand the sign shall not be illuminated

I understand the sign is only permitted for a maximum of 3 yrs, in which I will need to obtain another permit in 3 yrs.

Signature of Applicant_____

Position in Company, if applicable _____

Date_____

Determination of Land Use

To be completed by appropriate Zoning Official:

Designation of Parcel on the Future Land Use Map: _____

Current Zoning of Parcel (from Land Development Regulations _____

Does the referenced property qualify as a commercial or industrial parcel as defined in section 479.024, F.S. abd section 14-10.0052.F.A.C. Yes or No

Provide the website page where electronic copies of the documents referencing the future land use designation list above on the application_http://_____

Is the location within city limits Yes or No if yes the city_____

Land Devlopment Administrator Signature_____date_____

I certify that the above information reflects the designation of the parcel as it shown on the current comprehensive plan adopted pursuant to chapter 163 Florida Statute, and that I am authorized to sign this form on behalf of Madison County.

Signature of Local Government Official_____

Date_____

Printed Name and Title_____