

Sign Permit Application Building Inspection Division

Permit #

Please visit our website to view a sign submittal checklist and aids to assist you in submitting a complete set												
of plans. Please note that any sign permits will not be issued until a Business Tax Receipt is issued for the												
business if it is new or changing locations and an electrical permit for the sign if required is submitted.												
Property Address of Sign:												
Advertised Business Name:												
Property Owner Name:												
Address:												
City:				State:		Zip:		Phone:				
Lakeland Contractor # Qualifie						ne:						
Туре:	Ground		Wall		Oth	er						
Size: INDICATE ON PLANS Job Cost:												
Height: INDICATE ON PLANS												
Class: Elec	tric 🔃 Nor	n-Electric	Mat	terials:	Metal		Wood	Pl	astic	Other		
Number of Display Faces:												
Existing signs to remain. Yes No If yes, sq. ft. of those signs:												
If a Ground, Pole, or Monument Sign, INDICATE THE LOCATION ON THE SITE PLAN.												
Face change only: Yes No												
General description of proposed sign:												
Application is hereby made for a building permit to do the work as briefly described above and in consideration of the issuance of such permit, I												
agree that this application is subject to being built as referenced to the applicable approved plans and in accordance to the Zoning Ordinance, Building Code, and other ordinances of the City of Lakeland and laws of the State of Florida applicable thereto. It is understood that any												
deviation from the information contained herein unless approved by the Building Inspector will render the building permit null and void. I												
hereby certify that the information set forth above is true and correct and that I am the property owner or lessee, or acting as the agent of												
either and have been authorized by them to make this application. Applicant's Signature:						Date:						
Applicant 3 Signature.									ite.			
Print Name: A					Applican	pplicant's E-mail:						
Company Name:						Phone:						
Company Address:												
For Official Use Only												
Approved By: Date:												
	_ <u>_</u>						Cian Dorm		1			
Penalty? Yes No Address confirmed w/legal					Sign Permit Fee: \$ Sign Plan Review Fee: \$							
Zoning:					Electrical Permit Fee: \$							
Sign Size:					Trus	Trust Fund Surcharge Fee: \$						
Sign Height	<u> </u>							C Fee:	\$			
3.6	-							l Fees:	\$			
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