

ZONING CLEARANCE FOR SIGN PERMIT

Application Date:				
Property Owner Name:				
Address:		City/Tow	City/Town :	
State:	Zip:	Phone No	o.:	
Zoning Designation of Parce	ıl:			
Licensed Sign Company Na	ne:			
Address:		City/Tow	/n:	
State:	Zip:	Phone No	o.:	
Street Address or legal descr	iption of the property u	pon which the propose	d sign is to be located:	
Height, size, shape, colors, a	nd material of the propo	osed sign:		
Type of sign and general des	cription of structural de	esign and construction	material to be used:	
Include: Drawings including adjacent streets, walks, and e		ation of the proposed in	nstallation, with dimensional reference to any	
the following information 1. Two (2) paper copie pressure requirements, electr Building Code. 2. In addition to the above the following code.	to obtain the Zoning Cles and one (1) digital corrical specifications, and hove required data, the I	learance. py of Sign Plan drawn display material in acc Building Official may r	to scale showing all pertinent structural details, ordance with the requirements of the Florida require such additional information as he may of a sign under Art. IX, Ch. 4, LDC.	
Applicant Signature			Date	
BELOW	V TO BE COMPLETE	ED BY THE TOWN (OF MONTVERDE STAFF	
Reviewed by Town Planner:			Date:	
Reviewed by Town Clerk: _			Date:	
Date Application Received:		Received By:		
Fees Due:	Fee	es Paid:	Date Paid:	