

**SIGN PERMIT APPLICATION  
CITY OF ST. AUGUSTINE BEACH BUILDING DEPARTMENT**

**BUILDING PERMIT # \_\_\_\_\_**

**PARCEL # \_\_\_\_\_**

**OWNER'S NAME** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_

**BUSINESS NAME** \_\_\_\_\_ **JOB SITE ADDRESS** \_\_\_\_\_

**CONTRACTOR** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_

**SCOPE OF WORK:** ( ) NEW INSTALLATION      ( ) CHANGE-OUT      ( ) REPAIR      ( ) OTHER \_\_\_\_\_

**NO OUTDOOR ADVERTISING DISPLAY SIGN SHALL BE ERECTED, CONSTRUCTED, ALTERED, MAINTAINED OR RELOCATED WITHOUT A PERMIT ISSUED BY THE BUILDING OFFICIAL, EXCEPT FOR SIGNS RELATING TO AN ELECTION.**

**ALL APPLICATIONS FOR SIGN PERMITS SHALL FOLLOW THE GENERAL PROVISIONS FOR A SINGLE SIGN OR MULTIPLE NUMBER OF SIGNS. HOWEVER, IN CASES WHERE THE SIGN(S) CAN BE CLASSIFIED AS ONE OF THE FOLLOWING TYPES, THOSE PROVISIONS SHALL SUPERSEDE THE GENERAL PROVISIONS (CHECK WHICHEVER TYPES APPLY).**

NUMBER OF SIGN(S)	TYPE OF SIGN	ELECTRICITY (YES/NO)	LIGHTING TYPE	SQ. FT. OF SIGN
	GROUND SIGNS			
	WALL SIGNS			
	WALL SIGNS AT RESTAURANTS			
	DRIVE THROUGH LANE SIGNS			
	AWNING SIGNS			
	CANOPY SIGNS			
	CHANGEABLE COPY SIGNS			
	PROJECTING SIGNS			
	OTHERS (PLEASE EXPLAIN):			

**AN ADDITIONAL FEE MAY BE ASSESSED ON EACH COMMERCIAL SIGN BY THE ST. JOHNS COUNTY FIRE SERVICE REVIEW AND INSPECTION DIVISION LOCATED AT 4040 LEWIS SPEEDWAY, ST. AUGUSTINE, FLORIDA 32084**

**SUBMITTAL OF THIS COMPLETED APPLICATION DEMONSTRATES THE UNDERSTANDING AND COMPLIANCE WITH THE CITY OF ST. AUGUSTINE BEACH LAND DEVELOPMENT CODE REGARDING SIGNS.**

**TOTAL VALUATION OF WORK \$** \_\_\_\_\_ **SIGN CONTRACTOR'S NAME (print)** \_\_\_\_\_

**SIGN CONTRACTOR'S ADDRESS** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**QUALIFYING BUSINESS NAME** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_

**SIGNATURE OF CONTRACTOR** \_\_\_\_\_ **STATE LICENSE #** \_\_\_\_\_ **CITY LICENSE #** \_\_\_\_\_

**STATE OF FLORIDA, COUNTY OF ST. JOHNS**

The foregoing instrument was sworn to (or affirmed), subscribed, and acknowledged before me by means of [ \_\_\_\_\_ ] physical presence or

[ \_\_\_\_\_ ] online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by (print name of person signing above) \_\_\_\_\_

who is personally known to me [ ] or has produced the following type of identification \_\_\_\_\_

\_\_\_\_\_  
Stamp or Seal of Notary Public:

Signature of Notary Public, State of Florida

NOTICE: THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED  
SIGN PERMIT APPLICATION 20-01