



City of Dunnellon - Community Development

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SIGN PERMIT APPLICATION

SUBMIT ALL PAGES, INCLUDING THIS PAGE ALONG WITH ALL REQUIRED DOCUMENTS.

FACE CHANGES TO SIGNS WITH NO CHANGE TO SIZE OR ELECTRICAL DO NOT REQUIRE A PERMIT.

STEPS TO OBTAIN A SIGN PERMIT

<input type="checkbox"/>	Identify the property zoning using the GIS map at www.dunnellon.org . Enter the property address in the search bar.	What is the zoning designation? _____
<input type="checkbox"/>	Using the GIS map, uncheck the 'zoning' layer box. Under the Community layer, select Historic District Overlay to verify if property is in the Historic District, which has its own sign requirements.	Is property in the Historic District? _____ If so, see City Code Sec. 11.10 for requirements.
<input type="checkbox"/>	Reference City Code for Signage . Read the section pertaining to the correct zoning designation.	Applicable section(s) of code: _____
<input type="checkbox"/>	Street frontage width for individual business sites (find it on the MCPA Property Record Card). Print record to submit with application.	Street frontage width: _____
<input type="checkbox"/>	Unit frontage width (width of unit/suite)	Unit width: _____
<input type="checkbox"/>	ORD#2022-07: Signs which are non-conforming with current codes must be brought into compliance upon movement, replacement, or being structurally altered (does not include face changes only).	

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THE PERMIT APPLICATION TO BEGIN THE REVIEW PROCESS. IF AN ITEM IS NOT PROVIDED, THE PLAN REVIEW TIME PERIOD MAY BE STOPPED UNTIL PROPER DOCUMENTATION IS SUBMITTED.

<input type="checkbox"/>	Drawings to scale showing proposed sign with dimensions (dimensions must also be listed in table below). Must show placement on elevations for wall signs (two copies). Include anchoring detail.
<input type="checkbox"/>	Site plan of parcel (two copies) showing placement of signs, setbacks from right-of-way, and setbacks from side property lines. Applicant must show setbacks between signs on same parcel.
<input type="checkbox"/>	Contractor's Certificates of Insurance for Liability and Worker's Comp. If electrical work is to be done, a Certified Electrical Contractor must be on the permit application.
<input type="checkbox"/>	A legal survey shall be required for a freestanding sign being installed in a location where a previous sign did not exist.
<input type="checkbox"/>	Letter from property owner / property manager allowing wall signage (FORM K).
<input type="checkbox"/>	Printed copy of the Property Record Card from Marion County Property Appraiser MCPA Search Agree (marion.fl.us)
<input type="checkbox"/>	Pick up permit. - Permits are valid for 60 days.

SIGN PERMIT APPLICATION (page 2)

Job Site Address:		Zoning Designation:	
Name to Appear on Sign:		Parcel #:	
Is property within the Historic District?	Yes No	Job Cost:	\$

Site Details:

<input type="checkbox"/> Stand-alone Business Site	<input type="checkbox"/> Shopping Center	<input type="checkbox"/> Office Complex	<input type="checkbox"/> Multi-Use Complex	<input type="checkbox"/> Industrial Park	<input type="checkbox"/> Other
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Existing Signs: List total sign area of existing signs and whether they will be removed. For units/suites, only list signage assigned to subject unit or suite.

Existing Sign Type	Total SF Area for All Sign Types	How many existing signs will be removed?
Freestanding		
Wall/Window/Fascia		
Roof/Projecting		
Off-Site (billboards)		

Proposed Signs *(if erecting more than five signs, print/copy this page for more entries):*

	Height (ft)	Area (sf)	Check one			# of Faces	Is electric required?	Is existing electrical connection available?
			Freestanding	Roof/Projecting	Wall/Window			
1								
2								
3								
4								
5								

Contractor(s) and Subcontractors:

	Qualifier Name	County Cert #	State License #	Email	Phone
Sign Contractor					
Electrician					
Other					

Architect/Engineer's Name		Architect/Engineer's Address	
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SIGN PERMIT APPLICATION (page 3)

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

The owner and/or contractor have the sole responsibility of determining compliance with setbacks and non-encroachment of easements. Permits expire 6 months after issuance if no inspections were performed. You are responsible for the completion of the permit, inspections, and all re-inspection fees.

Pursuant to Florida Statute 713.135, all signatures must be notarized				
Owner's Signature		OR	Contractor's Signature	
Printed Name			Printed Name	
Date			Date	
STATE OF FLORIDA, COUNTY OF MARION Sworn to (or affirmed) and subscribed before me by means of ___ physical presence or ___online notarization, this _____ day of _____ 20____ By _____ <input type="checkbox"/> Personally Known or <input type="checkbox"/> Produced Identification ID: _____ Notary Signature: _____ Notary Stamp:			STATE OF FLORIDA, COUNTY OF MARION Sworn to (or affirmed) and subscribed before me by means of ___ physical presence or ___online notarization, this _____ day of _____ 20____ By _____ <input type="checkbox"/> Personally Known or <input type="checkbox"/> Produced Identification ID: _____ Notary Signature: _____ Notary Stamp:	

CITY OF DUNNELLON USE ONLY:

Zoning Approval:		DATE:	
Building Official:		DATE:	
HISTORIC BOARD:	N/A Approved Not Approved	DATE:	