



## HERNANDO COUNTY COMMERCIAL WALL SIGN APPLICATION CHECKLIST

1. There is no limit to the number of attached signs which may be attached to the walls or the roof.
  2. The total display area for all attached signs shall not exceed 20% of the building facade on which the sign is located. Which means the height times width of the store front.
  3. Signs shall not extend more than six (6) feet above or beyond the wall or parapet wall or roof of the building.
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1. Application form must be completely filled out.
  2. Submit four (4) structural drawings, with **ALL** dimensions. Plans must be sealed by an engineer. All construction must conform with The Florida Building Code, 2004 Edition.
  3. Submit four (4) elevations with wording and **dimensions shown including height and width of building that signs will be placed on.**
  4. **building that signs will be placed on.**
  5. Valuation (indicate cost of project).
  6. Provide UL # for signs with Electric.

**Your plans will not be processed if any of the items listed above are incomplete or missing.**



**HERNANDO COUNTY  
COMMERCIAL SIGN APPLICATION**

**CONTACT PERSONS NAME**

Please Provide Your FAX #  
e-mail address

Key # \_\_\_\_\_ Date \_\_\_\_\_

Type of Sign to be Constructed: \_\_\_\_\_

Valuation Of Work To Be Done: \$ \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ Unit \_\_\_\_\_

Address Of Job Site: No. \_\_\_\_\_ Street \_\_\_\_\_

**Project Name** \_\_\_\_\_ **Shopping Center Name** \_\_\_\_\_

Directions To Job Site: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Interest In Property: \_\_\_\_\_

Name Of Fee Simple Titleholder: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SIGN CONTRACTOR** \_\_\_\_\_ Ph# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

License Number \_\_\_\_\_ (State Certification or Hernando County # Only)

**ELECTRICAL CONTRACTOR** \_\_\_\_\_ Ph# \_\_\_\_\_

License Number \_\_\_\_\_ (State Certification or Hernando County # Only)

**UL #** \_\_\_\_\_

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 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 of the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT FOR JOBS EXCEEDING \$2,500.00 MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

**IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

\_\_\_\_\_  
Owner or Agent (Including Contractor)

\_\_\_\_\_  
Print Name

State of Florida  
County of \_\_\_\_\_

The foregoing instrument was sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_, (\_\_\_\_) who is personally known to me or (\_\_\_\_) who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Notary Public

Application Approved By: \_\_\_\_\_  
Permit Representative

**Hernando County Development Department  
789 Providence Boulevard  
Brooksville, FL 34601  
Phone (352) 754-4050 Fax (352) 754-4151**

**www.co.hernando.fl.us**