

CITY OF BONITA SPRINGS

Community Development Department
9220 Bonita Beach Road, Ste. 111
Bonita Springs, FL 34135
Phone: (239) 444-6150
email: permitting@cityofbonitaspringscd.org

SIGN PERMIT APPLICATION (2024) PERMIT #: _____

***** THREE (3) SETS OF PLANS AND CONSTRUCTION DRAWINGS REQUIRED *****
*****ALL JOBS OVER \$5,000 WILL REQUIRE A RECORDED NOC BEFORE PERMIT ISSUANCE*****

The applicant shall insure that the application is accurate and complete and fully complies with all applicable zoning and land use regulations. Any additional expenses necessitated because of any inaccurate or incomplete information submitted to the division shall be borne by the applicant.

1. Business Name: _____ STRAP Number _____
2. Business Address: _____ City: _____ Zip: _____
3. Unit Number: _____ Shopping Center Name: _____
4. Building **Unit** Frontage in Square Feet: _____ Road Frontage in Linear Feet: _____
5. Contractor License Number: _____ Company Name: _____
6. Contractor Name: _____ Phone: Area Code: _____ Number: _____
7. Mailing Address: _____ City: _____ Zip: _____
8. E-mail Address: _____
9. Job Value: \$ _____
10. Type of Sign: Portable (60 days) Wall Ground Foundation
11. Sign Construction: Single Face Double Face Painted Plastic Metal Illuminated
 No-Illumination
12. Sign Action: Erect Alter Repair Move Temporary (180 days) Copy Change
13. Setbacks (Ground Signs only): Front _____ ft (15'min) Side _____ ft Height _____ ft Area _____ square feet
14. All Sign Permits Need to Provide a Site Plan Showing:
 - a. All property lines and all applicable easements.
 - b. All streets bounding the property.
 - c. Proposed location of structure.
 - d. Location of all buildings on the property.
 - e. Proposed setbacks.
 - f. Distance from front lot line to the leading edge of proposed structure.
 - g. Location of any fire protection equipment such as hydrants and driveways.
 - h. Visibility Triangle.
15. Construction Drawings are Needed Showing:
 - a. Foundation and/or anchoring plan.
 - b. Wall section.
 - c. Electric plan if equipped with electric (lighting/receptacles) per 2020 NEC.
 - d. A statement of compliance as follows: "This structure has been designed in accordance with the 2023 edition FBC, sec 1609, or FRC sec 301.2.1, wind loads." (160 mile/hour wind zone)

CONSENT TO ERECT SIGN

I will advise the business owner that obtaining a sign permit does not give them authorization to open a business without a Use Permit. I further understand that I am obtaining this permit and proceeding at my own risk and that if the Certificate of Occupancy or the Use Permit cannot be approved, the sign permit will not be approved.

Business Name: _____ Unit Number: _____
 Business Address: _____ City: _____ Zip: _____
 Contractor License Number: _____ Company Name: _____
 Contractor Name: _____ Phone: Area Code: _____ Number: _____
 Mailing Address: _____ City: _____ Zip: _____
 E-mail Address: _____

I, _____ do attest that the above information which I have submitted to the City of Bonita Springs Community Development is accurate and complete and any inaccurate or incomplete information submitted is a misrepresentation or error which may cause the zoning approval to be void and may further void or invalidate any permits issued based on the zoning approval. Any structures built pursuant to an invalidated permit must be removed or, if possible, a new application may be filed, and permits issued.

COMMUNITY DEVELOPMENT DEPARTMENT

Permit reviewed and approved based on information provided by applicant. Omitted and/or falsified information may void permit in accordance with 4-162(d).

APPLICABLE BUILDING CODES

8th ed. 2023 FBC; Florida Building Code: Building, Existing, Mechanical, Plumbing
 8th ed. 2023 FFC; Florida Fire Prevention Code
 NEC 2020; National Electric Code

SIGN ONLY IN THE PRESENCE OF A NOTARY PUBLIC

Contractor Signature: _____
 Contractor Name: _____
 Date: _____

STATE OF FLORIDA
 COUNTY OF LEE

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization ,
 this (day) _____ of (month) _____ , (year) _____ ,
 by (name of person making statement) _____ .

Signature of Notary Public - State of Florida: _____
 Print, Type, or Stamp Commissioned Name of Notary Public: _____

Personally Known OR Produced Identification

Type of Identification Produced: _____