



Permit # \_\_\_\_\_ Pin: \_\_\_\_\_

**CONSTRUCTION UNDER THIS PERMIT SHALL BE DONE IN ACCORDANCE WITH FBC 2023 8<sup>TH</sup> EDITION**

Site Address: \_\_\_\_\_

Legal Description (Section/Block/Lot): \_\_\_\_\_ Parcel ID: \_\_\_\_\_

**Owner's Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Contractor's Information**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ PSL Comp no. \_\_\_\_\_ State License no. \_\_\_\_\_

**PROJECT INFORMATION**

Sign location on the building or on the lot: \_\_\_\_\_ (example, north façade)

Electrical Contractor: \_\_\_\_\_

Type of sign:  Permanent  Temporary  New Install  Re-face  Vinyl Lettering (no contractor license required)

Style of sign:  Awning  Monument  Wall  Menu  Mural  Canopy (on an attached canopy)  Directional  LED

Projecting  Multi-tenant directory  Other: \_\_\_\_\_

Wording of sign: \_\_\_\_\_ Size of sign: \_\_\_\_\_ X \_\_\_\_\_

Square footage: \_\_\_\_\_ Sign color(s): \_\_\_\_\_

Will the sign be directly or indirectly illuminated?  Yes  No \*If no, skip to the next section.

Select one of the following:  New electrical circuit (separate electrical permit required)  Existing electrical circuit (hook-up of existing service only)  Re-face only (no electrical work is needed)

**\*Illuminated signs must be installed and wired in accordance with the current edition of the NEC by a state or locally licensed Sign Electrical Contractor or Electrical Contractor. ALL illuminated and outlined lighting installed within the City of Port St. Lucie shall be listed by a nationally recognized testing agency (NEC 600.3).**

**Total Valuation \$ \_\_\_\_\_**

**MUST BE SIGNED AND NOTARIZED**

_____ Contractor Signature <span style="float:right">Date</span>	_____ Owner or Owner's Authorized Representative Signature <span style="float:right">Date</span>
_____ Print Name	_____ Print Name
_____ Notary Public, State of Florida	_____ Notary Public, State of Florida
STATE OF FLORIDA, County of _____	STATE OF FLORIDA, County of _____
[NOTARIAL SEAL]	[NOTARIAL SEAL]
The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.	The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.

**FOR OFFICE USE ONLY**

**PERMIT FEE \$ \_\_\_\_\_** Payment method: \_\_\_\_\_ Last 4 Digits of Credit Card or Check no.: \_\_\_\_\_ Receipt no.: \_\_\_\_\_

Application date: \_\_\_\_\_ Rec'd by: \_\_\_\_\_



# CITY OF PORT ST. LUCIE PLANNING DEPARTMENT SIGN PERMIT CHECKLIST

Sign application documents and Planning and Zoning review fee shall be submitted first to the Planning and Zoning Department. After The Planning Department's zoning approval is complete the application packet will be submitted to the Building Department for permit processing and review.

## PLANNING AND ZONING REQUIRED INFORMATION

### 1. FREESTANDING (MONUMENT) SIGNS

- Sufficient information describing location on sign. (Example; Northeast corner)
- Approved site plan with sign location identified.
- Distance from property lines indicated on drawing and checklist.
- Height of proposed sign.
- Dimensions of sign panel dimensioned on drawing.
- Show placement on sign of minimum 6 inch address numbers on drawing.
- Linear frontage of parcel indicated on drawing and checklist.

### 2. FACADE (WALL) SIGNS

- Elevation drawing of approximate sign location on building.
- Linear frontage of business shown on drawing and checklist.
- Dimensions of sign on drawing and checklist. Drawing shall have a rectangle from highest point to lowest point and side to side. \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ square feet proposed.

### 3. INFORMATION FOR ALL PROPOSED SIGNS

- Property parcel ID# \_\_\_\_\_
- Will the sign be directly or indirectly illuminated?
- Sign material and colors indicated on drawing.
- Letter of authorization is attached to packet.

### 4. SIGNS WITHIN A MASTER SIGN PROGRAM (MSP) AREA (Contact Planning for MSP locations)

- Letter from master sign program design review board stating that the proposed sign is consistent with the regulations of the program.
- If required by the master sign program stamped plans stating approval by the design review board.

NOTE: Be sure to contact the Building Department for a list of required documents. (772)871-5132



## SIGN REVIEW PROCESS

A sign packet shall be submitted for zoning review to the Planning and Zoning Department.

After the Planning and Zoning Department approves and electronically Stamps the submitted drawing, the sign application packet will be submitted to the Building Department for review and processing of a sign permit.

The Planning Department shall electronically email the approved packet and if paper documents were submitted the paper packet will be delivered to the Building Department.

The Planning and Zoning Department will review the drawings for zoning compliance.

The Building Department will review the Building Department applications and engineering of the drawings for Building Code Compliance. The Building Department will require additional fees for the sign permit.