



# CITY OF TREASURE ISLAND COMMUNITY DEVELOPMENT DEPARTMENT

120 – 108<sup>TH</sup> Ave.

Treasure Island, FL 33706

Phone: (727) 547-4575 ext. 230 Fax: (727) 547-4584

Inspection Line: (727) 547-4575 ext. 431

## Signs

### Items Required to Apply for a Permit

- Proof of Property Ownership** – PCPAO printout, deed, Sunbiz report if LLC, etc.
- Signs of All Types Permit Application** – Signed by the contractor / authorized agent and homeowner. [per FS 713.135 (6)(a)]
- Contract** – Between owner and contractor, signed and dated.
- Subcontractor Verification Form** – (For electrical, if used). Subcontractor will need to come into the Building Department to sign on before the master permit is issued.
- Site Plan** – Two sets; Show the following:
  - Location of sign(s)
  - Lot frontage
  - Setbacks from property lines
  - Location of structure(s)
  - All other existing sign(s) on the property, location(s) and sign area(s).
- Elevation drawings** – two sets; to show height and width of sign and building
  - For each Wall Sign: Square Footage, Type of Sign, Lineal Frontage of Building, Height to bottom of sign and height to the top of sign. The sign must be at least 6'-8" from a pedestrian surface and cannot extend above the highest point of the roof.
  - For each Freestanding Sign: Square Footage, Type of Sign, Lineal Frontage of Roadway and Height. Height of a freestanding sign is measured from the base of the sign at ground level to the top of any portion of the sign structure.

**For a wall sign extending 12" or more off the building, or a freestanding sign 10 ft. or higher:**

- Engineered Drawings** – Two sets, including electrical if used. Include colored renditions of the sign(s) as well as all dimensions of sign areas (in square footages), and sign structures. Must meet wind zone exposure D – 145 mph.

Sign and Advertising Code Chapter 73 City's Land Development Regulations. Link: [| Code of Ordinances | Treasure Island, FL | Municode Library](#)

**If Applicable:**

- Notice of Commencement** – For projects with a valuation over \$2,500 – Notarized and recorded. If not provided at time of application, required prior to first inspection.
- Condo / Homeowner Association Letter**

*Additional information may be required on a case-by-case basis.*

*A permit application will not be considered complete by the Community Development Department unless all required documents have been provided. All plans will be reviewed once all the correct documentation is submitted. Plans will be reviewed in the order they are received.*

**Permit Tech:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**CITY OF TREASURE ISLAND  
COMMUNITY IMPROVEMENT DEPARTMENT**

120 – 108<sup>TH</sup> AVENUE  
TREASURE ISLAND, FL 33706  
Phone: (727) 547-4575 Fax: (727) 547-4584  
Inspection Line: (727) 547-4575 ext. 431

FOR OFFICE USE ONLY  
TOTAL FEES \$ \_\_\_\_\_

**SIGNS OF ALL TYPES - PERMIT APPLICATION**

ALL WORK & MATERIALS PER CURRENT APPLICABLE BUILDING, ELECTRICAL, MECHANICAL, AND FIRE CODES. SEE CITY WEBSITE FOR CURRENTLY ADOPTED CODES.

APPLICATION DATE: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_

COMMERICAL: \_\_\_\_\_ RESIDENTIAL: \_\_\_\_\_

**PROPERTY INFORMATION:**

PROJECT ADDRESS: \_\_\_\_\_

SITE LEGAL DESCRIPTION: \_\_\_\_\_

PARCEL I.D. NUMBER: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**CONTRACTOR INFORMATION: (PLEASE COMPLETE OWNER/BUILDER AFFIDAVIT, IF APPLICABLE)**

REGISTERED COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

QUALIFIER'S NAME: \_\_\_\_\_

STATE LICENSE NUMBER: \_\_\_\_\_ PCCLB LICENSE NUMBER: \_\_\_\_\_

- (1) INSTALL \_\_\_\_\_ SF OF \_\_\_\_\_ TYPE OF WALL SIGN ON THE FACE OF A BUILDING WITH \_\_\_\_\_ LF OF FRONTAGE. THE BOTTOM OF THE SIGN MUST BE AT LEAST 6'8" FROM A PEDESTRIAN SURFACE AND WILL BE \_\_\_\_\_' TO THE TOP OF THE SIGN. IT CANNOT EXTEND ABOVE THE TOP OF THE ROOF LINE.
- (2) INSTALL \_\_\_\_\_ SF OF \_\_\_\_\_ TYPE OF FREESTANDING BUSINESS SIGNAGE ON ROAD FRONTAGE WITH \_\_\_\_\_ LF OF ROAD FRONTAGE. THE SIGNAGE SHALL BE \_\_\_\_\_' HIGH. IF THE PROPOSED SIGN IS 10' OR HIGHER, TWO (2) SETS OF SIGNED AND SEALED ENGINEERED PLANS ARE REQUIRED.

**The Sign Code is in Chapter 73 Land Development Regulations**

VALUE OF WORK: \$ \_\_\_\_\_ VALUE OF EXISTING STRUCTURE: \$ \_\_\_\_\_

**NOTICE:** In addition to the work described under this permit, there may be additional requirements applicable to this property established by city, county, state and/or federal legislation. Further there may be additional permits required from other governmental entities such as the water management district, state agencies, or federal agencies, Section 553.79 (10), Florida Statutes.

Any permit for demolition or renovation shall contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of Section 469.003, F.S., and to notify the Florida Department of Environmental Protection of his/her intentions to remove asbestos, when applicable, in accordance with state and federal law, Section 553.79(11), Florida Statutes.

**A letter from Pinellas County Air Quality shall also be provided.**

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.

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.

APPLICANTS ARE RESPONSIBLE FOR COMPLYING WITH THE FEDERAL AND STATE OF FLORIDA REQUIREMENTS FOR THE AMERICANS WITH DISABILITIES ACT.

I understand that I am subject to enforcement, penalties and / or fines for violation if inspection of the property reveals that I have made additions, renovations or remodeling to the property which were not included in the permit documents.

\_\_\_\_\_  
Signature of Owner or Agent

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization who is personally known to me or has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
(Print, Type or Stamp Commissioned Name of Notary Public)

\_\_\_\_\_  
Signature of Contractor

STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by means of \_\_\_\_\_ physical presence or \_\_\_\_\_ online notarization who is personally known to me or has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
(Print, Type or Stamp Commissioned Name of Notary Public)

(FOR OFFICE USE ONLY)

<b>ZONING APPROVAL (IF APPLICABLE):</b>	<b>BUILDING DEPARTMENT APPROVAL:</b>
<b>FLOODPLAIN APPROVAL (IF APPLICABLE):</b>	<b>FIRE / PUBLIC WORKS APPROVAL:</b>