



Walton County Planning and Development Services

APPLICATION FOR SIGN PERMIT

Application Package Contents

ALL APPLICATIONS SHALL BE SUBMITTED USING THE ONLINE PORTAL

<https://www2.citizenserve.com/waltonplanning>

All signs installed in the unincorporated areas of Walton County shall comply with the regulations of the Walton County Land Development Code 6.04.00

A separate application form must be filled out for each individual sign request.

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SUBMITTAL CHECKLIST

APPLICATION FOR SIGN PERMIT – INITIAL SUBMITTAL WILL INCLUDE THE FOLLOWING ITEMS

If any submittals do not meet these requirements, they will not be accepted

(Credit Cards Accepted or Check payable to Walton County)

- Fee for Sign Permit Application: \$75
- Copy of approved Certificate of Land Use Compliance
- Proof of Ownership or copy of lease agreement
- Completed Application
- Color copy of sign representation drawn to scale, which includes:
 - Scale of the drawing
 - Dimensions of the sign
 - Sources of illumination
 - Colors and finish materials of the sign and copy area
 - Method of constructions and attachment to the ground or building
- Copy of site plan or survey to indicate location of the proposed signage (monument, building (building elevations), directory, kiosks, etc) and all existing signage on same parcel or unit
- Ground signs that are 10 or more feet in height or ground and building signs that are 100 or more square feet must be designed and certified by a registered Florida Engineer
- Building elevation or other documentation indicating the building dimensions

Applicant

Name: _____

If company or corporation, name of secretary or officer

Address: _____

City, State, Zip: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Sign Contractor

Name: _____

If company or corporation, name of secretary or officer

Address: _____

City, State, Zip: _____

Telephone Number: _____ Fax Number: _____

Email Address: _____

Parcel Number: _____

Project Name: _____

Street Address: _____

DESCRIPTION OF SIGN CONSTRUCTION

(mark appropriate box and fill in corresponding information)

GROUND SIGN

WIDTH= _____ HEIGHT (as measured from the crown of the road)= _____
SQUARE FEET of sign= _____

Linear footage of property _____ Copy area % _____ Letter height _____

BUILDING SIGN
(check one)

_____ Free standing building
_____ Occupant/unit within a multiple occupancy bldg.
_____ Building ID sign for shopping center/multiple occupancy bldg.

Height of sign on building _____ Length _____ Width _____
Square footage of sign _____
SQUARE FEET of façade area _____ Letter height _____

The building/unit for which this sign is proposed is: (check one) _____ > than 15,000 s.f. _____
_____ < than 15,000 s. f.

OTHER

(Directional Sign, Community Directory Sign, Residential/Community Entrance Sign)

Height _____ Width _____ Square Footage _____ Letter Height _____

ILLUMINATION SOURCE: _____

TOTAL ESTIMATED VALUE OF SIGN: _____

(NOTE: If lighting will be added at a later date, a state licensed electrician will be required to pull a separate permit.)

Is this sign part of a County approved Master Sign Plan? YES NO

Name of building complex that has Master Sign Plan _____

(NOTE: Including a copy of the Master Sign Plan would expedite review of the application.)

SANDWICH BOARD SIGN

6.05.07. Sandwich Board Signs: Sandwich board signs shall be reviewed and approved by the Building and Planning Department with the following conditions:

- A. Sign Area: Sandwich Boards shall not exceed 3 feet 6 inches in height, twenty-four (24) inches in width. (Sandwich Board sign area shall not count against the total allowed square footage of signage per business).
- B. Location: Sandwich Boards shall be located so that they do not block sidewalks. Signs should be located in front of the advertised business entrance only. Sandwich boards are prohibited from placement on public trails and greenways.
- C. Number: Only one (1) sandwich board shall be permitted per business.
- D. All such signs must be removed and stored inside a structure at the close of business each day, and may be placed in the permitted location at the opening of business the following day, for the period that the sign permit is valid.
- E. Sandwich boards shall have a maximum of two panels.

STAFF USE ONLY

BUILDING PERMIT # _____ DATE ISSUED _____ PERMIT FEE _____
DO # _____ DATE ISSUED _____ PERMIT FEE _____
CLERK _____

APPROVED _____
Planning Department Official Date

APPROVED _____
Design Review Board Project Manager (if Required) Date

DISAPPROVED _____
Building Official (signature required for signs that meet wind load requirements of the Florida Building Code) Date

Agent Affidavit / Special Power of Attorney

STATE OF FLORIDA COUNTY OF WALTON

KNOW ALL MEN BY THESE PRESENTS, that I _____ am presently the owner and/or leaseholder of _____ and desiring to execute a Special Power of Attorney, have made, constituted and appointed, and by these presents do make, constitute and appoint _____ whose address is _____. County of _____, State of _____, my Attorney full power to act as my agent in the process of obtaining an _____ pertaining to _____.

FURTHER, I do authorize the aforesaid Attorney-in-Fact to perform all necessary tasks in the execution of aforesaid authorization with the same validity as I could effect if personally present. Any act or thing lawfully done hereunder by the said attorney shall be binding on myself and my heirs, legal and personal representative, and assigns.

PROVIDED, however, that any and all transactions conducted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by the said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "Attorney-in-Fact."

WITNESSES:

APPLICANT:

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by:

[] Physical Presence

- OR -

[] Online Notarization

This ____ day of _____, 20____, by _____, as _____, for _____.

Printed Name of Notary Public

Signed Name of Notary Public

Commission Number: _____

Expiration Date: _____

(SEAL)

FLORIDA STATUTES 837.06 – FALSE OFFICIAL STATEMENT

Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083 .

I have read and understand all the information provided in this application, the requirements listed within the application, and agree to provide the necessary information requested by Walton County. The information I have provided on this application is true and correct to the best of my knowledge.

Applicant's Signature

Printed Name

Date

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by:

Physical Presence

- OR -

Online Notarization

This ____ day of _____, 20____,

By _____, as _____,

for _____.

(SEAL)

Signature of Notary Public

Name of Notary Typed, Printed or Stamped

Personally Known

Produced Identification

Type of Identification Produced: _____
