

TEMPORARY BANNER APPLICATION

CITY OF TAMARAC BUILDING DEPARTMENT
6011 NOB HILL ROAD 1ST FLOOR - TAMARAC, FL 33321-6200
PHONE: (954) 597-3435 FAX: (954) 597-3450

TAMARAC ALLOWS EITHER TWO 15-DAY OR ONE 30-DAY PERIOD FOR BANNERS PER YEAR.

I am applying for a **30-day** banner permit.

In making this application the undersigned affirms that, to the best of their knowledge, there has been no 30-day Temporary Banner Permit and no 15-day Temporary Banner Permits issued for this business at this premises in the preceding twelve (12) month period.

I am applying for a **15-day** banner permit.

In making application for this 15-day banner permit, the undersigned affirms that, to the best to their knowledge, there has been no 30-day Temporary Banner Permit and there has not been more than one (1) 15-day Temporary Banner Permit issued for this business at this premises in the preceding twelve (12) month period.

SELECT ONE: Going Out of Business Grand Opening Holiday Change of Ownership/Management

Applicant: _____ Phone: _____

Address: _____ City: _____

Signature: _____

STATE OF FLORIDA
COUNTY OF BROWARD

On this the _____ day of _____ 20____, before me the undersigned Notary Public of the State of Florida, personally appeared

(Name(s) of individual(s) who appeared before notary)

NOTARY PUBLIC
SEAL OF OFFICE:

and whose name(s) is/are subscribed to the within instrument, and he/she/they acknowledge that he/she/they executed it.

WITNESS my hand and official seal.

NOTARY PUBLIC, STATE OF FLORIDA

(Name of Notary Public: Print, Stamp, or Type as Commissioned.)

Personally known to me or,

Produced identification: _____
(Type of Identification Produced)

DID Take an oath, or DID NOT take an oath.

Contractor: _____ Licensee #: _____

Signature: _____ Phone #: _____

STATE OF FLORIDA
COUNTY OF BROWARD

On this the _____ day of _____ 20____, before me the undersigned Notary Public of the State of Florida, personally appeared

(Name(s) of individual(s) who appeared before notary)

NOTARY PUBLIC
SEAL OF OFFICE:

and whose name(s) is/are subscribed to the within instrument, and he/she/they acknowledge that he/she/they executed it.

WITNESS my hand and official seal.

NOTARY PUBLIC, STATE OF FLORIDA

(Name of Notary Public: Print, Stamp, or Type as Commissioned.)

Personally known to me or,

Produced identification: _____
(Type of Identification Produced)

DID Take an oath, or DID NOT take an oath.

COPY TO APPEAR ON BANNER: _____ WIDTH _____

HEIGHT _____

- BANNERS' MUST BE PLACED ON THE FACE OF THE BUILDING IN FRONT OF YOUR BUSINESS -

TEMPORARY BANNER REQUIRES A LETTER OF REQUEST ADDRESSED TO THE BUILDING OFFICIAL FOR APPROVAL OF ERECTING A TEMPORARY BANNER FOR EITHER 15 OR 30 DAYS, NOTING THE LOCATION, THE DAY IT WILL BE ERECTED AND THE DAY IT WILL BE REMOVED.

THE BANNER MUST NOT RESTRICT VEHICULAR OR PEDESTRIAN TRAFFIC AND MUST NOT CREATE A FIRE HAZARD.

ZONING REVIEWED BY: _____ DATE: _____

BUILDING OFFICIAL APPROVAL: _____ DATE: _____

Total Days Approval _____ Beginning Date: _____ Expiration Date: _____ **Banner Fee \$44.00**

(\$40+DCA \$2/DBPR \$2)