

**City of Springfield, Florida**  
3529 E. 3rd. St.  
Springfield, Florida 32401  
(850) 872-7570 Fax: (850)747-5663



File No.: \_\_\_\_\_

**Sign Permit Request:**

Contractor/Qualifier: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor License No.: \_\_\_\_\_

Business job for: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

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

Legal Description: \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Sub/Div.: \_\_\_\_\_

Project Type: \_\_\_\_\_

On Premise Sign: \_\_\_\_\_ Off Premise Sign: \_\_\_\_\_

**Description Of Work Performed Under This Permit:**


Illuminated: \_\_\_\_\_

Non-Illuminated: \_\_\_\_\_

Job Value: \_\_\_\_\_

**Please Attached Complete Diagram**

Area On One Side: \_\_\_\_\_ Sq. Ft.

Height: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**This Application Must Be Submitted To the City Of Springfield Planning Board**