# CRA Temporary Advertising Device Permit Application

<table>
<thead>
<tr>
<th>Application Date:</th>
<th>Receipt Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Received By:</td>
<td></td>
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</tbody>
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The Application for a permit to display one or more temporary advertising devices must be submitted to the Charlotte County Zoning Office a minimum of three (3) days prior to the beginning of the display period with a $20.00 permit fee and a complete application may need to be reviewed by the CRA Committee.

<table>
<thead>
<tr>
<th>Applicant's Name:</th>
<th>Business Requesting Permit:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address of Business:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City:</th>
<th>State:</th>
<th>Zip Code:</th>
<th>Telephone No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot:</td>
<td>Block:</td>
<td>Subdivision:</td>
<td>Unit Section:</td>
</tr>
<tr>
<td>Section:</td>
<td>Township:</td>
<td>Range:</td>
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</tbody>
</table>

Please attach separate sheet if a metes & bounds description.

Existing Zoning Classification:

Property Owner’s Name:

**Time Period of expected display:** *(Time period cannot exceed thirty days)*

<table>
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<th>From:</th>
<th>To:</th>
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Number and Size of Devices expected to be displayed:

(MAY NOT EXCEED 24 SQUARE FEET)

***Owner’s Authorization:*** If the applicant is not the owner of the property where the Temporary Advertising Device will be displayed, the Applicant must have the owner complete the "Property Owner's Consent" section.

**Site Plan:** On a separate sheet, please attach a site plan of an appropriate scale which illustrates clearly the placement of all temporary advertising devices requested under this permit application. The property lines, streets, parking lot, and any structures located on the property should also be shown on the site plan. See last page of application.
Affidavit

I, the undersigned, being first duly sworn, depose and say that all answers to the questions in this application, and all sketches, data and other supplementary matter attached to and made a part of the application, are honest and true to the best of my knowledge and belief. I understand this application must be completed and accurate before the application may be considered. I further agree to abide by all requirements of the temporary advertising device regulations set forth in Charlotte County Code Section 3-9-50.4 – Signs in the Charlotte Harbor CRA.

_________________________________________  ________________________________________
Signature of Applicant                           Printed Applicant's Name

State of Florida, County of ______________________

The foregoing instrument was acknowledged before me this ________ day of __________, 20______
by ______________________________________ who is personally known to me or who has
produced __________________________ as identification and who did/did not take an oath.

_________________________________________  ________________________________________
Signature of Notary                               Notary's typed or printed name

Commission Number ______________________________

Property Owner's Consent

I, _____________________________, property owner of _____________________________, do hereby give
permission to ___________________________(business name), to place temporary advertising
devices, as permitted by the Charlotte County Code Section 3-9-95 (n), at the aforementioned location.

_________________________________________  ________________________________________
Signature of Property Owner                           Printed Owner's Name

State of Florida, County of ______________________

The foregoing instrument was acknowledged before me this ________ day of __________, 20______
by ______________________________________ who is personally known to me or who has
produced __________________________ as identification and who did/did not take an oath.

_________________________________________  ________________________________________
Signature of Notary                               Notary's typed or printed name

Commission Number ______________________________
Temporary Advertising Device Site Plan

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Office Use Only:

Has the applicant been issued any other T.A.D. permits during the same calendar year? _____
If so, when? ______

Reviewed by: ______________ Date Issued: ______________ # of Stickers issued: ______________

Permit Number/Numbers issued for this display: ____________________________________________

Revised 7/16/2013