

Development Services Department
1515 NW 167th Street, Bldg.5, Suite 200
Miami Gardens, Florida 33169
Phone: (305) 622-8023
Fax: (305) 622- 8857
www.miamigardens-fl.gov



OFFICE USE ONLY

Date Received: _____

Process No. _____

Project Location: _____

VARIANCE SIGN PERMIT APPLICATION

TYPE OF APPLICATION:

- Administrative Variance
 Public Hearing

APPLICANT INFORMATION:

Name of Applicant: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

Other phone: _____ Email: _____

PROPERTY'S OWNER INFORMATION:

Owner's Name (Provide name of ALL owners): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

Other phone: _____ Email: _____

BUSINESS INFORMATION:

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone#: _____

Other phone: _____ Email: _____

OTHER INFORMATION:

1. FOLIO Number(s) of property: _____

2. Is this application a result of a violation notice? no yes. If yes, attach copy of violation:

REQUEST: (Please reference section of the sign code and details of your request)

SUBMITTAL CHECKLIST

The following items must be submitted with this application:

<u>Required</u>	<u>Provided</u>	<u>Description</u>
<input type="checkbox"/>	<input type="checkbox"/>	Registration of Lobbyists – must register with the City Clerk’s office as lobbyists. Accordance to Ordinance No. 2004-02-18
<input type="checkbox"/>	<input type="checkbox"/>	Letter of Intent - signed by the applicant, listing what is being requested, and reasons why applicant feels the request should be approved, detailing variances, zoning requests, explaining zoning hardship, etc.
<input type="checkbox"/>	<input type="checkbox"/>	Application - <u>completely</u> filled out and properly executed. (Folio numbers are mandatory).
<input type="checkbox"/>	<input type="checkbox"/>	Boundary Survey - (required with every application, no older than 1 year. Must show all structures, rights-of-way, etc. and any municipal boundary, if any). Legal Description - must be accurate and submitted in electronic format on diskette or compact disc (CD), in addition to printed (hard) copy.
<input type="checkbox"/>	<input type="checkbox"/>	Plans – twelve (12) full sets of plans at time of submittal
<input type="checkbox"/>	<input type="checkbox"/>	Word Format – Folio & <u>Legal description</u> must be submitted in word format on CD.
<input type="checkbox"/>	<input type="checkbox"/>	PDF and/or *.JPG/JPEG digital format – In addition to hard copies, <u>all standard set of plans</u> , plats, surveys and renderings must be submitted on CD.

FEE SCHEDULE

<u>Description</u>	<u>Fee</u>	<u>Applicable</u>
Public Hearing Base Fee	\$1000.00	_____
Variance of Sign Regulation	\$1800.00	_____
Violation (if result of a violation)	\$3000.00	_____
Notices & Advertisements		
Notices requiring a radius of 500 ft. for Commercial	\$ 2700.00	_____
OR;		
Administrative Variance of Sign Regulation	\$750.00	_____
Subtotal		_____
Surcharge of 15%		_____
Grand Total		_____

NOTE: Please make all checks payable to ‘City of Miami Gardens’ / Cash, Credit or Debit accepted

OWNERSHIP AFFIDAVIT

STATE OF _____

COUNTY OF _____;

Before me, the undersigned authority, personally appeared _____, hereinafter the Affiant, who being first duly sworn by me, on oath, deposes and says:

1. Affiant(s) is the fee owner of the property that is the subject of the proposed hearing.
 Affiant(s) is the president, vice-president or CEO of the Corporation.
2. The subject property is located at: _____
3. Affiant(s) is legally authorized to file this application for public hearing.
4. Affiant(s) hereby authorize _____, herein referred to as the "applicant" to file for and obtain said sign permit type, herein described in this application.
5. Affiant understands this affidavit is subject to the penalties of law for perjury and the possibility of voiding of any zoning granted at public hearing.

Applicant:

Owner:

Signature

Affiant's signature

Print Name

Print Name