



**APPLICATION FOR CANAL INFORMATIONAL SIGNAGE**

*Department of Public Services  
9495 SW 180<sup>th</sup> Street  
Palmetto Bay, Florida 33157*

Application No. \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

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

Email: \_\_\_\_\_

City/State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Justification for Requesting Informational Sign(s):**

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\_\_\_\_Initial I understand and acknowledge that these informational signs are strictly for notification and are non-enforceable by any local, state or federal law enforcement agency or governmental body.

\_\_\_\_Initial I understand and acknowledge that I must obtain the consent and approval of the neighbors that are adjacent to my home for this application to be processed for approval.

\_\_\_\_Initial I understand and acknowledge that the Village of Palmetto Bay reserves the right to remove the signs or relocate the signs with no prior notification to property owner. I also understand and acknowledge that there could be other governmental agencies that may move or remove the sign as part of their normal operations

\_\_\_\_Initial I understand, agree and promise to hold harmless the Village of Palmetto Bay, its employees, agents, successors, from fault with respect to any claim or claims arising from alleged



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negligence in the placement, maintenance, operation, and removal of any and all signage placed pursuant to this permit.

\_\_\_\_\_ Initial I understand and acknowledge that I will allow the Village to inspect the informational signs at any reasonable time and that the Village of Palmetto Bay will require access to the sign as part of their normal operations and maintenance.

\_\_\_\_\_ Initial I understand and acknowledge that no informational sign shall be installed within 1000 feet of another informational without warrant and approval of SFWMD and a designated representative of the Village of Palmetto Bay.

Your application package for placement of informational sign(s) must include:

1. The latitude/longitude coordinates (degrees and decimal minutes) of each informational sign (s). *Optional*
2. Required signatures of the two (2) neighboring properties directly adjacent to the applicant's property relevant to the proposed location of the informational sign.
3. A completed application package must be received prior to placement of informational signage, unless otherwise directed by the Village Manager.

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**NEIGHBORING PROPERTY OWNER PETITION**

Neighbor Name: \_\_\_\_\_

Neighbor Address: \_\_\_\_\_

Neighbor Phone No.: ( ) \_\_\_\_\_ Neighbor Email: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_

Neighbor Name: \_\_\_\_\_

Neighbor Address: \_\_\_\_\_

Neighbor Phone No.: ( ) \_\_\_\_\_ Neighbor Email: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone No.: ( ) \_\_\_\_\_ Applicant Email: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_



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**ADMINISTRATION SECTION  
For Office Use Only**

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Local Government Action



Approval:



Denial:

Authorized Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Title: \_\_\_\_\_

**Approved Sign(s) Location**

NO.	LATITUDE/LONGITUDE	SITE	LOCATION	DIRECTION	WORDING

Date Installed: \_\_\_\_\_

Installer Signature: \_\_\_\_\_