

Temporary Sign Permit/Residential



CITY OF OVIEDO

400 Alexandria Boulevard
Oviedo, Florida 32765

Phone: (407) 971-5781
Fax: (407) 971-5819

Permit No. _____

Date Received _____

Expiration Date _____

TYPE OF SIGN(S): ☐ Garage Sale
☐ Residential Open House ☐ Estate Sale
☐ HOA Community Garage Sale

Submittal Checklist

___ TEMPORARY SIGN PERMIT
APPLICATION COMPLETED IN
FULL

___ IDENTIFY ALL SIGN(S)
(DIMENSIONS, LOCATION,
ETC.)

___ NUMBER OF SIGN(S)
REQUESTED

___ LAYOUT PLAN SHOWING
LOCATION OF SIGN(S)

___ DATES REQUESTED FOR
SIGNAGE

___ LETTER(S) OF PERMISSION
FROM PROPERTY OWNER(S)
OR HOA

___ APPLICATION FEE
(if applicable)

Applicant

Name: _____

Address: _____

Subdivision: _____

Phone: _____ Email: _____

EVENT START DATE: _____ EVENT END DATE: _____

NUMBER OF SIGNS: (2 MAX) _____ SIZE OF SIGNS: _____

ADDRESS/LOCATION OF SIGN(S): _____

HOA COMMUNITY GARAGE SALE ONLY: (\$33.00 per banner, one at each entrance)

OF BANNERS: _____ **SIZE OF BANNER(S):** _____

ADDRESS/LOCATION OF BANNER(S) _____

I hereby certify to the best of my knowledge and belief that all information submitted with this application is true and accurate. If the applicant is someone other than the property owner, a statement signed by the property owner, which authorizes the applicant to apply for this specific purpose at this specific location, must be attached to the application.

___ Owner/Renter of record for the property described herein.

___ Authorized Agent (authorization attached)

Signature

Date