



# City Of Starke

*Carolyn B. Spooner*  
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*Water*  
*Sewer*

*BUILDING*  
*DEPARTMENT*  
*Wilson Whidden,*  
*Official*

*ZONING DEPARTMENT*  
*Nora Thompson,*  
*Consultant*

*CODE ENFORCEMENT*  
*Lajuan Whittle*  
*Code Officer*

## SIGN APPLICATION REVIEW PROCEDURE

1. The completed sign application along with a non-refundable application fee of \$100.00 made payable to the City of Starke.

2. Once the application is reviewed and approved by staff, a Building permit and or Electrical permits will then need to be pulled before the signs are installed. The amount of the permit is based on the job value.

If a free standing/ground sign is installed a survey prepared within the last (24) twenty four months is required to be submitted along with the application.

The sign ordinance can be found at [cityofstarke.org](http://cityofstarke.org), look for the Building and Zoning tab to the left. Once on this page go down to Zoning and look for the Land Development Code. The sign regulations is Section: 6-20.

Any questions can be directed to the Lajuan Whittle, Code Enforcement Officer.

**SIGN REVIEW APPLICATION**

NAME OF APPLICANT/PROPERTY OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARCEL #: \_\_\_\_\_ ADDRESS OF JOB SITE: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

BUSINESS NAME (IF DIFFERENT FROM OWNER): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CONTRACTOR'S NAME (IF APPLICABLE): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CONTRACTOR LICENSE #: \_\_\_\_\_ CONTRACT VALUE: \_\_\_\_\_

**LOT FRONTAGE ON ALL STREETS AND PUBLIC RIGHT OF WAYS:**

**FREE STANDING /GROUND SIGNS**

HEIGHT: \_\_\_\_\_ WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_ QUANTITY: \_\_\_\_\_

INDICATE IN FEET AND INCHES THE LOCATION OF THE SIGN IN RELATION TO PROPERTY LINES, PUBLIC RIGHT OF WAYS, EASEMENTS, BUILDINGS, AND OTHER SIGNS ON THE PROPERTY. SHALL REQUIRE A BOUNDARY SURVEY WITHIN THE LAST 24 MONTHS FROM THE MONTH OF THE APPLICATION DATE, SIGNED AND SEALED BY A LAND SURVEYOR OR ENGINEER LICENSED IN FLORIDA SHOWING THE PROPOSED LOCATION OF THE SIGN. SIGN DIMENSIONS AND ELEVATION, DRAWN TO SCALE, MAXIMUM AND MINIMUM HEIGHT OF THE SIGN MEASURED FROM THE FINISHED GRADE, IF ILLUMINATED, SPECIFY ILLUMINATION TYPE, PLACEMENT, INTENSITY AND HOURS OF ILLUMINATION.

**WALL MOUNTED SIGNS**

HEIGHT: \_\_\_\_\_ WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_ QUANTITY: \_\_\_\_\_

FOR ALL WALL MOUNTED SIGNS SHOW THE FAÇADE ELEVATION, DRAWN TO SCALE, WINDOWS AND DOORS AND OTHER OPENINGS ALL DELINEATED AND THEIR DIMENSIONS GIVEN.

**EXISTING SIGN(S) IF APPLICABLE**

ATTACH DRAWING SHOWING LOCATION OF EXISTING SIGNS.

WALL: QUANTITY: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_

GROUND: QUANTITY: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WIDTH: \_\_\_\_\_ LENGTH: \_\_\_\_\_

SIGNATURE OF APPLICANT OR OWNER: \_\_\_\_\_

**DO NOT WRITE BELOW THIS BOX – OFFICE USE ONLY**

Date Filed: \_\_\_\_\_ Application #: \_\_\_\_\_ Fee Amount: \_\_\_\_\_

Receipt #: \_\_\_\_\_ Date reviewed and notified applicant: \_\_\_\_\_

Approved For: \_\_\_\_\_

Approved By: \_\_\_\_\_