



City Of Clewiston

Community Development Department

121 Central Avenue Clewiston, Florida 33440 • Phone 863-983-1500

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Temporary Sign Application

The Building Official reserves the right to determine whether this application is complete and accurate. Incomplete applications will not be processed and will be returned to the applicant.

General Information:

Name of Business: _____

Address of Business: _____ City: _____ State: _____

Business Owner: _____

Phone Number: _____ Email Address: _____

Property Owner: _____

Phone Number: _____ Email Address: _____

IS this a special event: Yes No If Yes:

Type of Special Event: _____ Special Event Date(s) _____ to _____

Type of Temporary Sign(s): _____

Description of the temporary Sign(s): _____

State of Florida,

Hendry County

Affirmation: I, _____ (applicant), hereby submit this information by requesting a permit to erect a temporary sign in Orange County, Florida. If said permit is issued, I agree to conform to all City of Clewiston ordinances and Building Division regulations pertaining to same and to construct the sign in accordance with plans submit

Applicant's Signature: _____ Date _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification.

Notary Public Signature _____ Date: _____

(Seal):