

CITY OF DORAL PLANNING & ZONING DEPARTMENT TEMPORARY IDENTIFICATION BANNER 8401 NW 53RD TERRACE, DORAL, FL 33166 PH (305) 593-6630

APPLICANT INFORMATION			
Applicant Name:		Contact Number:	
Name of Owner, if other than applicant (as applicable):			
Email Address:			
COMPANY INFORMATION			
Company Name: Property Address:			
Contact Number: Email Address:			
BUILDING HEIGHT & BANNER SIGN AREA INFORMATION			
Building Height	Feet	Banner Sign Area Sq. Ft. (Section 80-211 - City of Doral Land Development Code)	
MINIMUM SUBMITTAL REQUIREMENTS			
<u>Provided</u> <u>N</u>	Not Provided		
		Installation affidavit in accordance with manufacture's installation instructions	
		Completed Temporary Identification Banner Application	
		Copies of elevation plans	
		Certificate of Occupancy (if applicable)	
TEMPORARY IDENTIFICATION BANNER REQUIREMENTS			
* Fee: \$1,000.00 per month, per banner (Check payable to the City of Doral, Credit Card Visa or MasterCard).			
	` `	per building; one (I) banner per cardinal direction of building façade elevation.	
* Banners shall be affixed flush to the building façade wall surface.			
* Banners shall be removed in the event of a windstorm and/or issuance of hurricane warning. * Banners shall not be lit, 3-D, electronic, or illuminated in any way.			
* Earliest installation date: at the time that the new building construction is topped off per approved plans on file.			
* Final date of removal: Maximum six (6) months from Certificate of Occupancy.			
* The maximum duration of any temporary banner shall not exceed a one-time installation of 6 (six) continuous months.			
* Banners shall be attached to, and within the upper one-third (1/3) of the total building height for the structure.			
FOR OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE			
Building Height (Feet) Banner Sign Area (Sq. Ft.)			
Approved Denied			
Signature:		Date:	



City of Doral

Planning & Zoning Department 8401 NW 53rd Terrace, Doral, FL 33166 T 305-593-6630

TEMPORARY IDENTIFICATION BANNER CONTRACTOR'S INSTALLATION AFFIDAVIT

Applicant Name:	Date:			
Job Address (where banner will be installed):				
I hereby certify to the Planning and Zoning Debeen installed at the above location in accorda of the City's Land Development Code and ma	nce with the requirements of Section 80-211			
Contractor's Name:	License #:			
Contractor's Signature:				
STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to (or affirmed) and subscribed before m by means of □ physical presence or □ online no this day of, 20 By and who is □ personally known to me or □ produced a as identification	otarization,			
	Notary Public Signature			
	Print Name			

My Commission Expires: