MANATEE COUNTY
FLORIDA

PRELIMINARY SIGN DESIGN REVIEW

Following is the preliminary review of the sign(s) proposed for:

Customer Name: _____
Address: _____ **Telephone:**_____
Contractor Name: _____
Address: _____ **Telephone:** _____
Reference – Final Site Plan (FSP) Number: _____
Type of Sign:
Illuminated: _____ Non-Illuminated: _____ Electronic Message Center: _____
Wall: _____ Monument / Ground: _____ Pylon: _____ Pole: _____ Subdivision: _____
Off-Site Directional: _____ Other: _____
Location of Sign:
Easement: _____ Landscape Buffer: _____ Median: _____ Right Of Way: _____
Whitfield Overlay: _____ North Central Overlay : _____ Entranceway: _____ Flood: _____
Proposed Setbacks: Front: _____ Rear: _____ Left Side: _____ Right Side: _____
Allowable Setbacks: Front: _____ Rear: _____ Left Side: _____ Right Side: _____
Required Visibility Triangle: 30' _____ 15'_____ Not Applicable _____
Proposed Sign Area: _____ **Allowable Sign Area:** _____
Proposed Sign Height: _____ **Allowable Sign Height:** _____
Proposed Sign Materials: Sign Face / Lettering: _____
Structure:_____
Comments:
_____
_____

THE PROPOSED SIGN DESIGN IS: ACCEPTED: ____ REJECTED: ____

Reviewed By: _____ **Customer / Contractor:** _____

Date: _____ **Date:** _____