

CITY OF KEY COLONY BEACH

P.O. BOX 510141

KEY COLONY BEACH, FL 33051-0141

305 - 289-1212 FAX: 305-289-1767

APPLICATION FOR ADMINISTRATIVE VARIANCE

VARIANCE REQUESTED to Code of Ordinances Chapter 6, Section 6-20 Signs

NOTE: Only one (1) Administrative Variance per Business

Variance expires September 30 of each year.

APPLICANT: _____

Property Owner Name/Business Owner Phone Number

Street Address of Variance Lot Block Subdivision

Mailing Address of Property Owner

DESCRIPTION OF REQUESTED ADMINSTRATIVE VARIANCE:

Professionally Manufactured Sign _____

Type of Sign: _____

Location of Sign: _____

Distance from Street: _____

Please note: the placement & sign is subject to approval of the City Administrator and Building Official.

Fee Schedule:

Sandwich Board (not to exceed 2'x 4') \$75.00 annual fee B-1 & RH only

Contractor/Banner Style (not to exceed 30 sq ft) \$150.00 annual fee B-1, RH, & R-3 only

Signature of Applicant _____

Signature of Property Owner _____

Office Use Only

Date Filed _____

Date Paid _____

Check # _____

Review and Comments:

_____ Application for Administrative Variance Granted.

_____ Application for Administrative Variance Denied.

Comments: _____

Building Official _____

Variance granted / denied on (date) _____

ADMINISTRATIVE VARIANCE – CONSENT FORM

The business owner requesting the variance should complete the “Business Owner Requesting the Variance” information. Provide the completed form to the Property Owner for signature.

This form must accompany the Application for Administrative Variance.

BUSINESS OWNER REQUESTING THE VARIANCE:

Name: _____

Business Name: _____

KCB Address: _____

Mailing Address: _____

Telephone #: _____

Email Address: _____