



Application for Pop Up Art

OFFICE USE ONLY

APPLICATION #: _____

Approved by: _____

Answer all the questions on this form and submit all required attachments. Incomplete applications will not be reviewed by the Public Art Commission. If you have questions about application requirements please contact the Public Art Commission Attn., Lisa Holder, PAC Board Liaison at 407-688-5019 or by email Lisa.Holder@sanfordfl.gov.

GENERAL INFORMATION

Commercial Historic District Residential Historic District Is this a retroactive request? Yes No

Is this application filed in response to a Notice of Violation from the Code Enforcement Department? Yes No

Proposed improvements will affect the following elevations: North South East West

Property Address: _____

PROPERTY OWNER INFORMATION

Print Name: _____ Signature: _____

Mailing Address: _____

Phone: _____ Email: _____

APPLICANT/AGENT INFORMATION

Print Name: _____ Signature: _____

Mailing Address: _____

Phone: _____ Email: _____

BY SIGNING BELOW, YOU ACKNOWLEDGE THAT A BUILDING PERMIT MAY BE REQUIRED FOR THE SCOPE OF WORK LISTED BELOW. YOU MUST CONTACT THE BUILDING DEPARTMENT TO DETERMINE IF A BUILDING PERMIT IS REQUIRED. FAILURE TO OBTAIN A BUILDING PERMIT MAY RESULT IN A STOP WORK ORDER, DOUBLE PERMIT FEES, AND POTENTIAL FINES. BY SIGNING BELOW, YOU ALSO ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF YOUR KNOWLEDGE.

Signature: _____ Date: _____

Check if you would like to receive emails regarding Public Art and Community Planning within your community.

DESCRIPTION OF PROPOSED ART

Completely describe the entire scope of work, including proposed location, type of art, and medium to be used.
