

Sign Permit Application

State of Nevada, Department of Transportation

Any False information will void permit

Sign Owner _____
(This is the address the permit and annual billings will be sent to)
Address _____
City _____ State _____ Zip _____
Email _____

Property Owner _____
(Attach property owners signed consent such as a letter or copy of lease)
Address _____
City _____ State _____ Zip _____
Email _____

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SIGN LOCATION

City or County _____ Highway Route _____ Side of Highway _____
Name or Number N, S, E, W
APN _____ Section _____ Township _____ Range _____

Approximate Location _____
From Identifiable Landmark, Intersection, Milepost, or Existing Sign

SIGN DESCRIPTION (Sign dimensions, do not include supports)

Height _____; (_____ 2nd side) Width _____; (_____ 2nd side) Distance of panel bottom to ground _____ Number of posts _____
Post Material: Wood Metal Other (Describe) _____ Illuminated Yes No
Will this sign have a changeable message? No Yes (If Yes, attach plans showing how message will be displayed and changed).

Amount accompanying application \$ _____ Check # _____
I certify all information on this application is true and that the sign will not be built or maintained from NDOT right-of-way.

Signature of Sign Owner or Agent _____ Title _____
Printed Name _____ Telephone _____ Tax Id No. _____

ZONING AFFIDAVIT (To be executed by the applicable City or County zoning authority. If the sign site is in a county that does not have zoning, attach a sketch map showing the qualifying business as outlined in NAC 410.320.)

This will certify that the sign described above is located within the jurisdiction of _____ (City or County) and the zoning is for a Commercial or Industrial activity. Zoning Designation _____ Is this a Resolution of Intent? Yes No

If yes give effective date _____ and expiration date _____

Does this sign comply with all local requirements including all variances and use permits? Yes No

Has the zoning been changed within 3 years? No Yes

If yes give date of change _____ and Zone Change Number _____

Reason for change _____

Signature _____ Title _____

Printed Name _____ Telephone _____ Date _____

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TRANSPORTATION DEPARTMENT USE ONLY

Application Received by _____ on _____ at _____ am pm Permit # _____