

# APPLICATION FOR INSTALLATION OF TOURIST ORIENTED DIRECTIONAL SIGN (TODS)

North Dakota Department of Transportation, Maintenance Division

SFN 19926 (Rev. 10-2008)

Page 1 of 4 - Sign 1

REF Number

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## PLEASE PRINT

Applicant Name			
Street Address			
City	State	Zip Code	Phone Number
Business Name			
Exact Business Name (maximum number of letters and spaces 32 characters)			

## BUSINESS OR ATTRACTION INFORMATION

Principle type of business or attraction available at the destination:
Normal hours of business: _____ to _____
Is the business or attraction open on a year-around basis? <input type="checkbox"/> Yes <input type="checkbox"/> No
If no, a "CLOSED" plate is required at any time the business or attraction is closed for periods exceeding 14 days.

## TYPE OF SIGN REQUESTED

<input type="checkbox"/> Right turn direction <input type="checkbox"/> Straight ahead (Straight ahead signs limited to tee-intersections only)
<input type="checkbox"/> Left turn direction
Exact location of sign
On the ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) side of ND Highway _____
a distance of _____ feet ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) from the nearest milemarker number

## EXACT LOCATION OF BUSINESS

The intersection of the road going to the business is _____ feet ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) ND Highway _____
Does the business, service or activity comply with all local and state laws and regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No

I, the undersigned, accept the terms and conditions of the rules of the North Dakota Department of Transportation and the laws of North Dakota and agree to fully comply therewith to the satisfaction of the North Dakota Department of Transportation. I understand that the sign posts, when erected, become the property of the North Dakota Department of Transportation. I further certify that all of the information stated in this application is true and correct.

Date

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X \_\_\_\_\_

Applicants signature

Submit application and a check for \$25 permit fee for each direction. Make checks payable to NDDOT.



**LOCATION SKETCH SPACE** (Submit sketch of highway showing proposed sign location and business location.)

**CONTRACTOR'S INFORMATION**

Contractor's License Number	Expiration Date of Contractor's License	Expiration Date of Contractor's Bond
<p><b>X</b> _____</p> <p style="text-align: center;">Contractor's Signature <span style="margin-left: 200px;">Date</span></p> <p><b>Effective November 24, 2008, the Contractor shall be required to wear an ANSI/ISEA 107-2004 Class II high visibility garment while with in the highway right-of-way as per the reuirements of 23 CFR 634.</b></p>		

**CITY USE ONLY** (if sign location is within corporate city limits)

Permission is granted by the city of \_\_\_\_\_ for the erection of the sign as described in this application.

\_\_\_\_\_

City Official Title

**X** \_\_\_\_\_

City Official Signature Date

**DEPARTMENTAL USE ONLY**

District	Permit Number <span style="float: right;"><input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W</span>
<p>Permission is granted for the erection of the sign as described in this application.</p> <p style="text-align: right;">Date</p> <p><b>X</b> _____ <span style="margin-left: 100px;"> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> </span></p> <p style="text-align: center;">District Engineer Signature</p>	

**SPECIAL INSTRUCTION:** A copy of this permit must be furnished to the contractor selected to erect the sign, therefore, send the contractor's copy to the sign applicant.



# APPLICATION FOR INSTALLATION OF TOURIST ORIENTED DIRECTIONAL SIGN (TODS)

North Dakota Department of Transportation, Maintenance Division

SFN 19926 (Rev. 10-2008)

Page 3 of 4 - Sign 2

## PLEASE PRINT

Applicant Name			
Street Address			
City	State	Zip Code	Phone Number
Business Name			
Exact Business Name (maximum number of letters and spaces 32 characters)			

## BUSINESS OR ATTRACTION INFORMATION

Principle type of business or attraction available at the destination:
Normal hours of business: _____ to _____
Is the business or attraction open on a year-around basis? <input type="checkbox"/> Yes <input type="checkbox"/> No
If no, a "CLOSED" plate is required at any time the business or attraction is closed for periods exceeding 14 days.

## TYPE OF SIGN REQUESTED

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<input type="checkbox"/> Left turn direction
Exact location of sign
On the ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) side of ND Highway _____
a distance of _____ feet ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) from the nearest milemarker number

## EXACT LOCATION OF BUSINESS

The intersection of the road going to the business is _____ feet ( <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W) ND Highway _____
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	Date
<input checked="" type="checkbox"/> _____	<input type="text"/> / <input type="text"/> / <input type="text"/>
Applicants signature	
Submit application and a check for \$25 permit fee for each direction. Make checks payable to NDDOT.	



**LOCATION SKETCH SPACE** (Submit sketch of highway showing proposed sign location and business location.)

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\_\_\_\_\_

City Official Title

**X** \_\_\_\_\_

City Official Signature Date

**DEPARTMENTAL USE ONLY**

District	Permit Number <span style="float: right;"><input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W</span>
<p>Permission is granted for the erection of the sign as described in this application.</p> <p style="text-align: right;">Date</p> <p style="text-align: right;"> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> /              <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> /              <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> </p> <p><b>X</b> _____</p> <p style="text-align: center;">District Engineer Signature</p>	

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