

TOURIST ORIENTED DIRECTIONAL SIGN APPLICATION/PERMIT *(continued)*

Wisconsin Department of Transportation DT1864

PROPOSED SIGN LOCATION INSTRUCTIONS

1. Label the intersecting roads.
2. Place an arrow in the circle pointing to the North.
3. Check (X) one or two of the boxes corresponding to the proposed sign location(s). (TODS signs are only permitted on State Highways or U.S. Highways. They must direct motorists to businesses, which are located on County Highways or Town Roads.)
4. Place an O (circle) at the approximate location of your business.
5. Write in the name of the county in the lower left corner.
6. Write in any additional details or comments that would be helpful in determining the proposed sign location. (Optional)

The diagram shows a four-way road intersection. At the top, a box labeled 'Road Name' is connected to a vertical road. At the bottom, a box labeled 'Road Name' is connected to the same vertical road. A horizontal road crosses the vertical one. On the left side of the horizontal road, a box labeled 'Road Name' is connected. On the right side, another box labeled 'Road Name' is connected. In the bottom left corner, a box labeled 'County' is present. At the top right, there is a circle with 'NORTH ARROW' written around it. Four small squares (checkboxes) are placed at the four corners of the intersection. A larger circle is placed in the upper right quadrant of the intersection area.

CERTIFICATION

I, the applicant, certify that the statements contained on this application/permit are true and correct, and that the business identified is conducted in conformity to all laws applicable to nondiscrimination, and that discrimination is not exercised in regard to race, religion, color, sex, sexual orientation, or national origin. I understand that in addition to the attached administration fee, I am responsible for the manufacturing and installation costs for the proposed sign(s). I understand that this permit is revocable, and that it is subject to renewal every five years. I further understand that if my business is a seasonal business, that a "CLOSED" plaque will be placed on my sign when my business is closed for the season.

Applicant Name (First, MI, Last)
(Area Code) Telephone Number

X _____ (Date – m/d/yyyy)
 (Applicant Signature)

APPROVAL – APPROVED FOR WISCONSIN DEPARTMENT OF TRANSPORTATION

Subject to present and continuing compliance by the applicant with all requirements of s.86.196 Wis. Stats. and Chapter Trans. 200.08, Wisconsin Administrative Code, a permit is granted for the TODS sign described. This permit expires on the five-year anniversary date of the installation of the TODS sign panel.

X _____ (Date – m/d/yyyy) **X** _____ (Date – m/d/yyyy)
 (WisDOT Region Traffic Engineer) (State Traffic Engineer or Authorized Agent)

— For WisDOT Use ONLY —						
SIGN SIZE		PERMIT NUMBER		INSTALLATION DATE		
<input type="checkbox"/> RURAL (72")	<input type="checkbox"/> URBAN (48")	County	Number	Month	Day	Year