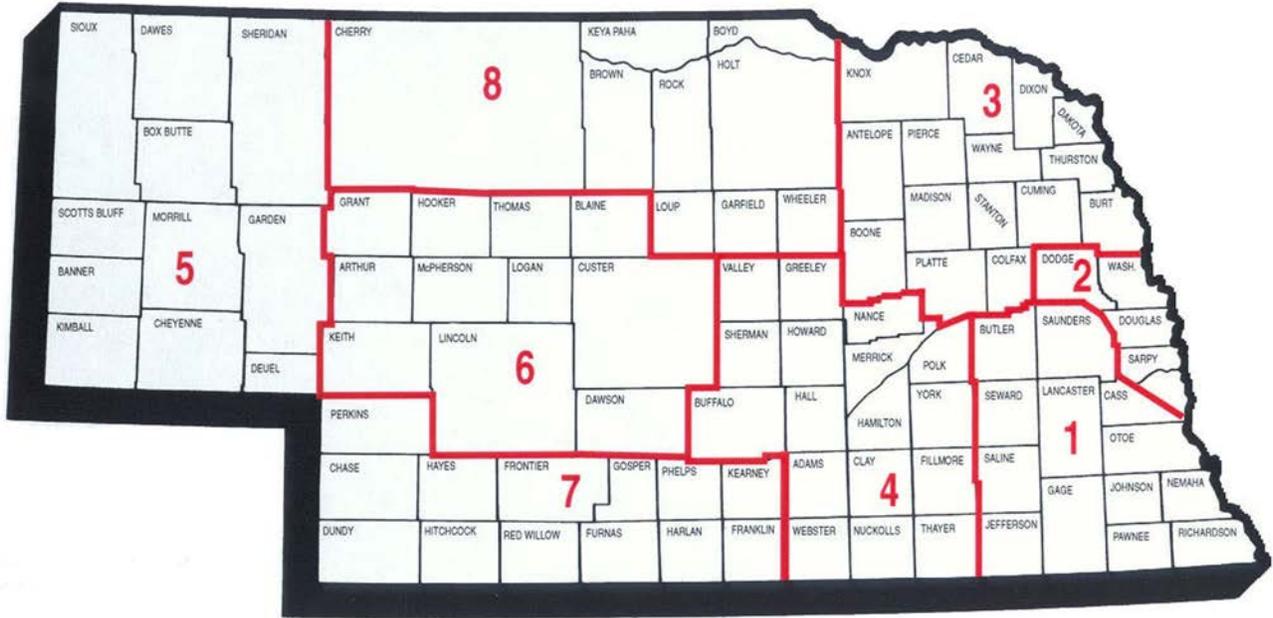


The following form may be filled out electronically, but when done, it needs to be signed, dated and mailed or faxed to the appropriate District Permit Officer.



District 1
 Nebraska Department of Roads
 District 1 Permit Officer
 302 Superior St
 PO Box 94759
 Lincoln NE 68509-4759
 Phone: (402) 471-0850
 Fax: (402) 471-3401

District 4
 Nebraska Department of Roads
 District 4 Permit Officer
 211 N Tilden
 PO Box 1488
 Grand Island NE 68802-1488
 Phone: (308) 385-6265
 Fax: (308) 385-6269

District 7
 Nebraska Department of Roads
 District 7 Permit Officer
 38764 US Hwy 6
 McCook NE 69001
 Phone: (308) 345-8495
 Fax: (308) 345-8412

District 2
 Nebraska Department of Roads
 District 2 Permit Officer
 4425 S 108th St
 PO Box 45461
 Omaha NE 68145-0461
 Phone: (402) 595-2534
 Fax: (402) 595-1720

District 5
 Nebraska Department of Roads
 District 5 Permit Officer
 PO Box 220
 140375 Rundell Rd
 Gering NE 69341
 Phone: (308) 436-6587
 Fax: (308) 633-6614

District 8
 Nebraska Department of Roads
 District 8 Permit Officer
 E Hwy 20
 736 E 4th St
 Ainsworth NE 69210-1215
 Phone: (402) 387-2471
 Fax: (402) 387-1498

District 3
 Nebraska Department of Roads
 District 3 Permit Officer
 408 N 13th St
 Norfolk NE 68701
 Phone: (402) 370-3470
 Fax: (402) 370-3473

District 6
 Nebraska Department of Roads
 District 6 Permit Officer
 1321 N Jeffers
 PO Box 1108
 North Platte NE 69103-1108
 Phone: (308) 535-8031
 Fax: (308) 535-8034

Application for Outdoor Advertising Permit

Date of Application:
Existing Sign – Date Erected:

Attach the following to the application

1) A copy of the **lease** with the landowner, 2) A copy of the **sketch showing the location of the sign**. 3) A copy of the **permit or a copy of a written approval** from the Local Permit Authority that they will issue a permit for this specific sign contingent upon the Nebraska Department of Roads issuing a permit for this specific location, 4) A **sketch, drawing or photo of the sign** being erected.

Name of Sign Owner:		Telephone No.:		Name of Landowner:		Telephone No.:		OFFICE USE ONLY
Address:				Address:				
CLASS OF SIGN APPLIED FOR								
<input type="checkbox"/> ID Owned and maintained by Public Offices or Public Agencies within their territorial jurisdiction.		<input type="checkbox"/> III Advertising sign (<i>Billboard</i>) – fee required.		<input type="checkbox"/> IVA Directional sign for qualifying attractions or activities.				PERMIT NUMBER
<input type="checkbox"/> IE School Bus Shelter.		<input type="checkbox"/> IVB Directional sign for qualifying organizations (<i>churches, clubs, etc.</i>).		<input type="checkbox"/> V Directional sign for farms and ranches.				
<input type="checkbox"/> IIA For Sale (<i>Interstate</i>) – fee required.								
<input type="checkbox"/> IIC "On Property" (<i>Interstate</i>). One sign per property owned by property owner – fee required.								
Verification of Zoning of Class III Sign Location				Verification of Unzoned Class III Sign Location				
Zoning Jurisdiction of: (<i>City or County</i>)				Jurisdiction of: (<i>City of County</i>)				
Zoning Type: (<i>attach copy of zoning map of the sign location</i>)				The location where this sign is to be located is unzoned.				
Commercial		Note specific zoning category:		Printed Name of City <i>or</i> County Clerk verifying sign location is unzoned.				
Industrial				<i>Dated:</i>				
Printed Name of Local Zoning Authority (<i>verifying zoning of location</i>):				Signature of City <i>or</i> County Clerk verifying sign location is unzoned.				
<i>Dated:</i>				<i>Dated:</i>				
Signature of Local Zoning Authority (<i>verifying zoning of location</i>):								
<i>Dated:</i>								
LOCATION OF ADVERTISING SIGN								
County:		Hwy. No.:		Side of Hwy.:		Reference Post to Nearest Tenth of a Mile (<i>Example 80.2</i>):		
				<input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W		Distance in Feet Near Edge of Sign is from the ROW line:		
Legal Description:								
DESCRIPTION OF SIGN				APPLICANT CERTIFICATION				
Type of Sign: <input type="checkbox"/> Single Face <input type="checkbox"/> Double Face <input type="checkbox"/> Back-to-Back <input type="checkbox"/> Side by Side <input type="checkbox"/> V-Type <input type="checkbox"/> Stacked <input type="checkbox"/> Changeable Message <input type="checkbox"/> Other (<i>describe</i>)				I certify all information provided above is true and accurate. A permit issued pursuant to this application may be revoked and applicant's sign removed by the Nebraska Department of Roads at applicant's expense if: 1. Applicant has provided false or misleading information on this application. 2. The erection of a sign pursuant to application violates State or local laws regarding zoning or violates State laws or Nebraska Department of Roads' rules and regulations regarding outdoor advertising.				
Supports: <input type="checkbox"/> Wood <input type="checkbox"/> Steel		Number of Supports:		Printed Name of Applicant:				
Face Material: <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Other:				Signature of Applicant:		Date:		
Number of Faces:				Above signature is of: <input type="checkbox"/> Owner <input type="checkbox"/> Officer <input type="checkbox"/> Agent				
Size (<i>in square feet</i>):				Address of Officer or Agent:				
Length:		Height:		Area:				
Length:		Height:		Area:				
Length:		Height:		Area:				
Length:		Height:		Area:				
Height above ground to top of sign in feet:				Phone No.:				
ReflectORIZATION: <input type="checkbox"/> Yes <input type="checkbox"/> No		Illumination: <input type="checkbox"/> Yes <input type="checkbox"/> No		Type:				
Type:		Type:						
Applicant Remarks:								
DEPARTMENT OF ROADS, LINCOLN OFFICE USE ONLY								
Fee Required: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, note the following check information: <input type="checkbox"/> Business Check <input type="checkbox"/> Personal Check Other (<i>describe</i>):				Office Remarks:				
Check No.:		Amount:		Date Received:		Initial:		
Staff Review (<i>Initial and Date</i>):		Supervisor Review (<i>Initial and Date</i>):						
Class Approved: <input type="checkbox"/> ID <input type="checkbox"/> IE <input type="checkbox"/> IIA <input type="checkbox"/> IIC <input type="checkbox"/> III <input type="checkbox"/> IVA <input type="checkbox"/> IVB <input type="checkbox"/> V								