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Application for Non-Reflectorized Official Business Directional Sign Permit(s), March 1, 2004

Maine Department of Transportation

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MAINE DEPARTMENT OF TRANSPORTATION APPLICATION FOR

NON-REFLECTOR	HZED
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PEFICIAL	BUSINESS	DIRECTIONAL	SIGN PERMIT (S)

OFFICE USE ONLY	
APPLICATION NO	
DATE	

	2					
		AL:	DATE:	Exact lo	ocation as follows:	
		DO NOT WRITE BELO	(Signature of Muni OW THIS LINE / OF		(Title)	(Date)
NOTE THAT MUNICIP.	T <u>MUNICIPA</u> PAL APPRO	NS MADE UNTIL THE LOCATIONS HAVE L APPROVAL IS REQUIRED IN THE SPA DVAL: I certify that the sign applied By:	ACE PROVIDED PRIOR d for herein complies	TO SUBMITTING AF with local ordinance	PPLICATION. ces.	
4"	\longleftrightarrow		11"	\rightarrow		
	Miles		Logo			
 [<u> </u>		\ <u>\</u>	→ '		
V		or 2 lines of print only	4"	Logo Descr	ription:	
12"	Logo			Applicant m	oust insert legend and all at the left.	/ or
,	.00 per sig	any application- (Make check payab 10 CHARACTERS PER LIN	E / LOGO	of Maine)	,	
		h does not apply. Miles	7	Miles	# M	iles
		block thus:	V	_	Route To _	
		direction to facility	_	10		
c. Insert R	Route # / Ro	oad names on sketch:	_	Route #	Route # To	
	number of s intersection	signs required n: 1 2	←	Miles	# • • • • • • • • • • • • • • • • •	
a. Check l	location des	sired thus:	L		Miles Route #	
Using sket	tch please g	rive information to locate intersection	n:		<u> </u>	
Applicant' Sign (s) Lo	's Signature ocation City	e: y / Town:		Date: Count	 ty:	
Contact Pe	erson:			Tel. #:		
City / Tow	daress: /n:			State:	ZIP Code:	
Moiling A		poration:				

_NOT APPROVED: MDOT representative to state reason for non-approval on back of this form. **Maine Department of Transportation** NOTICE: This application must be sent to: FOR INFORMATION CALL 207-624-3611 Attn: Traffic Division - OBDS 16 State House Station Augusta, Me. 04330-0016