RE: Billboard Sign Control Program

Dear Sir/Madam:

Enclosed is an application for a State Permit and our regulation booklet. Please review the regulations, and if the sign complies, submit a signed, completed application and W9 with the following:

☐ Enclose the property owner permission statement for the erection and/or maintenance of this sign within 30 days of the application date.

☐ Enclose a diagram or satellite image of the proposed sign location in relation to intersecting routes (include direction of travel and measurements).

☐ If the property is zoned, enclose a letter from the Zoning Authority stating the zoning classification.

☐ If the property requires a building or sign permit, enclose a copy of the permit dated within 30 days of the application date.

☐ Enclose a check or money order made payable to the Arkansas Department of Transportation, in the amount of $40.00.

Please submit your application within thirty (30) days to:

Arkansas Department of Transportation
Right of Way Division - Beautification
Section P. O. Box 2261
Little Rock, Arkansas 72203

If you have any questions, please call our office at (501) 569-2088.

William Reynolds
Section Head
Beautification Section
Right of Way Division
Application is hereby made for a Permit to erect and/or maintain an advertising sign in accordance with the provisions of Act 640 of the 1967 Arkansas Legislature and in accordance with the rules and regulation established thereunder by the State Highway Commission.

**PLEASE PRINT OR TYPE**

Name of Business/Facility __________________________ Phone __________________________
Name of Applicant/Owner/Manager __________________________ Email Address __________________________
Business Mailing Address __________________________ City __________________________ State __________________________ Zip Code __________________________

**PURPOSE OF APPLICATION**

☐ New Construction (How is location marked: stake, flag, etc.?)
☐ Existing Sign, Old Permit No._________________________
☐ Add Illumination to Existing Sign
☐ Re-erect Existing Sign
☐ Enlarge Existing Sign
☐ Other

**SIGN LOCATION DATA**

Highway __________________________ County __________________________ Nearest City/Town __________________________
Geographical Location (Decimal Degrees): Latitude __________________________ Longitude __________________________
Side of Highway (N, S, E, W) __________________________ Number of Intersecting State or U.S. Highway __________________________
Direction from Intersecting Highway (N, S, E, W) __________________________
Distance from Intersecting Highway (Miles/Tenths) __________________________

Name of Landowner __________________________ Mailing Address __________________________
City __________________________ State __________________________ Zip __________________________ Phone __________________________

**DESCRIPTION OF SIGN**

Facing: Height __________________________ Width __________________________ Lighting: ☐ Illuminated ☐ Non-illuminated
Arrangement of Facing: ☐ Single sided ☐ Back-to-back ☐ “V” Type ☐ Side by side ☐ Double decked
☐ Full vision ☐ Electronic Message Display (EMD) ☐ Other
Number of Support Poles: ______ Support Pole Material: ☐ Wood ☐ Metal ☐ Other

***APPLICANT CONTINUE TO PAGE 2***

- FOR OFFICIAL USE ONLY -

Highway __________________________ Latitude __________________________ Longitude __________________________ County __________________________
Inspector __________________________ Date Inspected __________ Date Approved __________ Date Denied __________
Permit No. __________________________ Application No. __________________________
Check No. __________________________ Check Amount __________________________ Installation Fee __________________________ Annual Maint. Fee __________________________

Revised 8/2020
ZONING AND LAND USE OF SIGN LOCATION

Is the location within the corporate limits of a city or town?  
☐ Yes  ☐ No

How is the location legally zoned?  ☐ Commercial  ☐ Industrial  ☐ Residential  ☐ Other  

Is City Building Permit or Sign Permit required?  
☐ Yes  ☐ No

Is the location within 600 feet of any business?  
☐ Yes  ☐ No  If yes, business name  

ATTACH WRITTEN VERIFICATION OF ZONING AND A COPY OF CITY BUILDING OR SIGN PERMIT

ON-CALL CONTACT PERSON

Name of Contact Person

Title

Office Phone

Cell Phone

REQUIRED ATTACHMENTS

☐ Enclose the property owner permission statement for the erection and/or maintenance of this sign within 30 days of the application date.

☐ Enclose a diagram or satellite image of the proposed sign location in relation to intersecting routes (include direction of travel and measurements).

☐ If the property is zoned, enclose a letter from the Zoning Authority stating the zoning classification.

☐ If the property requires a building or sign permit, enclose a copy of the permit dated within 30 days of the application date.

☐ Enclose a check or money order made payable to the Arkansas Department of Transportation, in the amount of $40.00.

CERTIFICATION

I certify that I have the authority to sign this application and the statements made herein are true and correct. I certify that this sign will not encroach, in any manner, on state highway right-of-way and that it will be removed at no expense to the Department if it is found to be an encroachment on state highway right-of-way. I certify that this sign will comply with all city and/or state ordinances.

I further understand that any falsification or misrepresentation of the statements in this application may result in the denial of the application or the revocation of my permit.

Applicant Name (Please Print):

Title

Applicant Signature:

Date:
**Request for Taxpayer Identification Number and Certification**

> Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

<table>
<thead>
<tr>
<th>Part I</th>
<th>Taxpayer Identification Number (TIN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <em>How to get a TIN</em>. Note: If the account is in more than one name, see the instructions for line 1. Also see <em>What Name and Number To Give the Requester</em> for guidelines on whose number to enter.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Part II</th>
<th>Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under penalties of perjury, I certify that:</td>
<td></td>
</tr>
<tr>
<td>1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and</td>
<td></td>
</tr>
<tr>
<td>2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and</td>
<td></td>
</tr>
<tr>
<td>3. I am a U.S. citizen or other U.S. person (defined below); and</td>
<td></td>
</tr>
<tr>
<td>4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.</td>
<td></td>
</tr>
</tbody>
</table>

**Sign Here**

<table>
<thead>
<tr>
<th>Signature of U.S. person *</th>
<th>Date *</th>
</tr>
</thead>
</table>

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN. If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.
To the Arkansas Department of Transportation:

__________________________
(Sign Owner)

HAS MY PERMISSION TO ERECT AND/OR MAINTAIN

A SIGN ON MY PROPERTY ADJACENT TO HIGHWAY _________ IN ____________________________

COUNTY NEAR __________________________ .

(City or Town)

__________________________
Name of Property Owner (Please Print)

__________________________
Email Address

__________________________
Property Owner Mailing Address

City

State

Zip Code

__________________________
Property Owner Signature

__________________________
Date

NOTE: Must be signed and dated within thirty (30 days) of the application date. A written lease agreement between the sign owner and the property owner may be substituted for this statement if dated within thirty (30) days of the application date.