



Infrastructure and Transportation
 Highway Planning and Design
 1420 - 215 Garry Street
 Winnipeg MB Canada R3C 3P3
 Fax: (204) 945-0593 Tel: (204) 945-3660

APPLICATION FOR ON OR OFF-PREMISE ADVERTISING SIGN WITHIN A CONTROLLED AREA ADJACENT TO PROVINCIAL ROADS

This application must include the following:

1. Copy of the land title certificate
2. Sketch showing location of requested sign and **Sign Message Content**
3. If sign is to be placed off-premises, written permission of landowner for placement of sign
4. **\$50.00** application fee payable to **MINISTER of FINANCE**
5. Application will not be processed until **ALL** information is submitted

CHECK ONE OR MORE OF THE FOLLOWING:

- Erect a New Sign
- Relocate an Existing Sign
- Alter/Reface a Sign

SIGN

- On-Premises
- Off-Premises
- Illuminated
- Non-Illuminated
- If Sign is to be illuminated additional information will be required

SIGN TO BE

- Temporary If Temporary for _____ months/weeks
- Permanent
- Portable
- "V" Shape
- Single-faced
- Double-faced

PROPOSED USAGE

- Historical
- Commercial
- Community
- Other (Please State) _____

THIS APPLICATION, IF APPROVED, DOES NOT DISPENSE WITH THE HOLDER THEREOF COMPLYING WITH ALL TERMS AND CONDITIONS OF ANY MUNICIPAL BY-LAW OR ZONING REGULATION

PLEASE PRINT

Adjacent to Highway No. (s) _____ Land Frontage on Highway _____ m
 To be located on the N S E W side of the highway
 Quarter _____ Section _____ Township _____ Range _____
 RL/OTM _____ Parish of _____
 Lot _____ Block _____ Plan _____ Land Title Office _____
 RMLGD _____ City, Town, Village, Community of _____
 Setback _____ from the highway right of way (property line)

Distance to Building/Service/Business being advertised _____ Km/M

SIZE AND DESIGN

Size of Sign: _____ x _____ Sign to face N S E W
 Height from Ground to Top of Sign _____ m
 Distance from nearest sign: _____
 Sign message: _____

REGISTERED LANDOWNER

APPLICANT

Name _____	Name _____
Address _____	Address _____
Town/Prov _____ Postal Code _____	Town/Prov _____ Postal Code _____
Tel No. _____ Fax No. _____	Tel No. _____ Fax No. _____
Signature _____	Signature _____
	Representing _____
	Date _____

FOR DEPARTMENT USE ONLY

\$50.00 Application Fee Received _____ / _____ / _____
 DD MM YY
 Fee Received by _____
 Control Section _____
 Sketch Plan No. _____

Region No. _____
 Cash, Cheque, Money Order No. _____
 Air Photo No. _____

REMARKS:

SIGNED: _____
 TECHNICAL SERVICES ENGINEER