

STATE OF ARKANSAS
BILLBOARD SIGN PERMIT APPLICATION

-For Office Use Only-
Application No. _____
Permit No. _____
County _____

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 regulations established thereunder by the State Highway Commission.

Please submit application to Arkansas Highway and Transportation Department, Environmental Division, P.O. Box 2261, Little Rock, AR, 72203. Applicant must submit an individual check or money order (no cash) payable to Arkansas Highway and Transportation Department in the amount of \$40.00 with each application.

PLEASE PRINT OR TYPE

NAME OF BUSINESS / FACILITY _____ TELEPHONE _____
NAME OF APPLICANT / OWNER / MANAGER _____ TITLE _____ FEDERAL TAX ID OR SOCIAL SECURITY NO. _____
BUSINESS MAILING ADDRESS _____ CITY OR TOWN _____ STATE _____ ZIP CODE _____

PURPOSE OF APPLICATION

- New Construction (How is location marked – stake, flag, etc.?) _____
- Existing Sign Add Illumination to Existing Sign Re-erect Existing Sign
- Enlarge Existing Sign Other _____

NOTE: INDICATE YOUR SIGN LOCATION BY DIAGRAM ON REVERSE SIDE OF APPLICATION.

LOCATION

Highway _____ County _____ Nearest City or Town _____
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 OR TOWN _____ STATE _____ ZIP CODE _____ TELEPHONE _____

NOTE: ATTACH WRITTEN VERIFICATION OF LANDOWNER'S PERMISSION STATEMENT FOR THE ERECTION AND/OR MAINTENANCE OF THIS SIGN.

DESCRIPTION OF SIGN

Facing: Height _____ Width _____ Lighting: Illuminated Nonilluminated
Arrangement of Facing: Single Sided Back-to-Back "V" Type Side by Side Double Decked
 Tri-Vision Electronic Message Display (EMD) Other _____
On-Call Contact Person: Name _____ Office No. () _____ Cell No. () _____
Number of Support Poles _____ Support Pole Material Wood Metal Other _____

ZONING AND LAND USE OF SIGN LOCATION

Is location within the corporate limits of a city or town? Yes No
How is location legally zoned Commercial Industrial Residential Agricultural Other _____
Is City Building Permit or Sign Permit Required? Yes No
Is location within 600 feet of any business? Yes No If yes, Name of Business _____

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

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.

PLEASE PRINT NAME _____ TITLE OR POSITION _____
SIGNATURE _____ DATE _____

-FOR OFFICE USE ONLY-

Check Number _____ Date Inspected _____ Highway _____
Permit Number _____ Date Permit Issued _____ Section _____
Inspector Initials _____ Date Denied _____ Log Mile _____

Remarks: _____

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <input type="checkbox"/> Other (see instructions) ▶ _____	
	<input type="checkbox"/> Exempt payee	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

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
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
3. I am a U.S. citizen or other U.S. person (defined below).

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 on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

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

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.