

OUTDOOR ADVERTISING (ODA) DISPLAY PERMIT APPLICATION

ODA-0002 (REV. 07/2007)

PERSONAL INFORMATION NOTICE:

Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code Sections 1798, et seq.), notice is hereby given for the request of personal information by this form. The requested personal information is voluntary. The principal purpose of the voluntary information is to facilitate the processing of this form. The failure to provide all or any part of the requested information may delay processing of this form. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual has the right upon request and proper identification to inspect all personal information in any record maintained on the individual by an identifying particular.

ADA NOTICE: For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 653-3657 or TDD (916) 654-3880 or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

DO NOT WRITE IN SHADED AREAS				
DISTRICT	COUNTY	ROUTE	POSTMILE	PERMIT NUMBER
ROAD / STREET / ADDRESS				
CSR NUMBER	DATE GRANTED	APPLICATION NUMBER		
PERMIT ISSUE DATE		PERMIT EXPIRATION DATE		

COMPLETE ALL SECTIONS. ISSUANCE OF A PERMIT WILL BE DELAYED UNLESS ALL ITEMS ARE FILLED IN AND THE PROPER FEES REMITTED. IF APPROVED, A COPY WILL BE RETURNED FOR YOUR RECORDS.

www.dot.ca.gov/oda

MAIL TO: DEPARTMENT OF TRANSPORTATION, Division of Traffic Operations MS 36, ODA Branch, P.O. Box 942874, Sacramento, CA 94274-0001

SECTION 1 - FEES (NO CASH ACCEPTED BY MAIL)

MAKE CHECK PAYABLE TO: DEPARTMENT OF TRANSPORTATION, OR PROVIDE THE INFORMATION BELOW TO APPLICABLE CREDIT CARD.

APPLICATION (non refundable)..... <input type="checkbox"/> \$300	PERMIT FEES:	2004-2008..... <input type="checkbox"/> \$500	2007-2008..... <input type="checkbox"/> \$200
PENALTY (required if display was placed prior to obtaining permit)..... <input type="checkbox"/> \$100		2005-2008..... <input type="checkbox"/> \$400	2008..... <input type="checkbox"/> \$100
PRELIMINARY REVIEW REQUEST (If approved, \$100 will be applied towards the application fee per CA Code of Regulations Section 5486)..... <input type="checkbox"/> \$200		2006-2008..... <input type="checkbox"/> \$300	
TOTAL FEES PAID: \$ _____		(The Department operates on a 5 year billing cycle: 2004-2008. Companies that have more than 10 permitted displays; known as pro-rata companies, may pay on an annual basis)	

METHOD OF PAYMENT: CHECK NUMBER _____ VISA MASTERCARD AMERICAN EXPRESS DISCOVER Expiration Date: _____

CHARGE ACCOUNT NUMBER _____ TOTAL FEES CHARGED _____ AUTHORIZED SIGNATURE _____

SECTION 2 - DISPLAY TYPE (CHECK THE APPROPRIATE BOX (ES))

STATIC DISPLAY TRI-VISION/MESSAGE CENTER DISPLAY REDEVELOPMENT DISPLAY PRIVATE DIRECTIONAL DISPLAY PUBLIC DIRECTIONAL DISPLAY

SECTION 3 - APPLICANT

PERMIT APPLICANT (Please print or type name of firm or individual desiring permit) _____ ODA LICENSED? YES NO LICENSE NUMBER _____

STREET ADDRESS (CANNOT be a Post Office Box) _____ CITY _____ STATE _____ ZIP CODE _____ BUSINESS PHONE NO. _____

MAILING ADDRESS, IF DIFFERENT (Street Address or P.O. Box) _____ CITY _____ STATE _____ ZIP CODE _____

SECTION 4 - PROPERTY

PROPERTY OWNER (Person in control of property upon which display is situated) _____ ASSESSOR'S PARCEL NO. _____ ZONING _____

STREET ADDRESS/P.O. BOX _____ CITY _____ STATE _____ ZIP CODE _____ BUSINESS PHONE NO. _____

SECTION 5 - DISPLAY LOCATION INFORMATION

COUNTY NAME _____ CITY NAME (if incorporated) _____ (circle) STATE ROUTE NUMBER OR ROAD / STREET NAME _____

FEET ? / MILES ? (Circle) _____ ON THE N S E W SIDE OF _____

NAME OF NEAREST CROSSROAD, OVER / UNDERPASS _____

IDENTIFY A BUSINESS ACTIVITY BY NAME THAT IS WITHIN 1,000 FEET OF THE DISPLAY LOCATION _____ STREET ADDRESS OF THE BUSINESS ACTIVITY _____

SECTION 6 - DISPLAY CONFIGURATION

NOTE: V - Shaped structures are separate displays and require two applications

COPY ONE SIDE BOTH SIDES 1/2 OF A V-SHAPED DISPLAY

HEIGHT _____ LENGTH _____ DISPLAY ID NUMBER (optional) _____

PANEL: NUMBER _____ SIZE _____ MATERIAL METAL WOOD OTHER _____

ILLUMINATION? YES NO INDICATE FACING N S E W DISTANCE FROM BOTTOM PANEL TO GROUND _____

MESSAGE CENTER: ELECTRONIC BOARD L.E.D. TRI-VISION

SECTION 7 - REQUIRED DOCUMENTS

Applications submitted without ALL of the following documents will be returned:

- Building Permit (City or County written permission) **
- Detailed plot map of the proposed display location
- Evidence of Property Owner's Consent **
- Assessor's Parcel Map
- Assessor's Property Ownership Information
- Consent of Redeployment Agency (if applicable)

** (NOTE: Not required if submitting a preliminary review)

CHECK ONE

An imprint is placed at the location

An imprint will be placed by: _____ (Date)

SECTION 8 - SIGNATURE

NAME (Please print) _____ SIGNATURE OF APPLICANT OR AUTHORIZED AGENT _____ BUSINESS PHONE NO. _____ DATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

The applicant hereby agrees to place and maintain the advertising display described above in accordance with the provisions of the Outdoor Advertising Act, State Regulations, and local zoning ordinances. The applicant certifies that the statements made in this application are true, and understands that an incorrect statement of fact may be grounds for permit denial or for permit revocation.

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Department of Transportation
Division of Traffic Operations MS-36
Outdoor Advertising Branch
P.O. Box 942874
Sacramento, CA 94274-0001
(916) 654-6473
(916) 651-9359 FAX

