

# Oklahoma Department of Transportation

For Official Use Only		
Date	Owner No.	<b>\$400.00</b> Fee Amount

Application for Highway Advertisement License  
New Applicants Only

Application is hereby made by the undersigned to be licensed to engage in the business of outdoor advertising in the State of Oklahoma in accordance with the provision of Title 69 O.S., Section 1271 et seq. and with the rules and regulations of the State Transportation Commission. **(Note to Applicants:** Licenses are renewed June 30th of each year. The renewal fee is \$200.00. Renewal notices are sent out the first week of June each year.)

## Part I - Applicant Information (To be completed by all applicants)

NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
*(Person, Firm or Corporation)* *(Name of Primary Contact Person)*

ADDRESS: \_\_\_\_\_  
*(Mailing Address)* *(City)* *(State)* *(Zip Code)*

\_\_\_\_\_ *(Physical Address)* *(City)* *(State)* *(Zip Code)*

TELEPHONE NO.: \_\_\_\_\_ CELL NO.: \_\_\_\_\_

FAX NO.: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

## Part II - Agent for Service of Process Information (To be completed by all out-of-state applicants only)

NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
*(Person, Firm or Corporation)* *(Name of Primary Contact Person)*

ADDRESS: \_\_\_\_\_  
*(Mailing Address)* *(City)* *(State)* *(Zip Code)*

\_\_\_\_\_ *(Physical Address)* *(City)* *(State)* *(Zip Code)*

TELEPHONE NO.: \_\_\_\_\_ NO. OF YEARS INCORPORATED OR RESIDED IN OKLAHOMA: \_\_\_\_\_

### OKLAHOMA HIGHWAY ADVERTISING LICENSE FEE - \$400.00

(Fees are payable to the Oklahoma Department of Transportation at the time of application.)

**REMARKS:** \_\_\_\_\_

STATE OF \_\_\_\_\_ §  
 COUNTY OF \_\_\_\_\_

\_\_\_\_\_ being of lawful age and first duly sworn upon oath deposes and states the following:

I, as the authorized representative of the organization listed above as "Applicant", so attest that I have read the foregoing information and that the facts set out therein are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
 Signature of Applicant or Representative

\_\_\_\_\_  
 Title or Position of Applicant or Representative (If Applicable)

**NOTARY PUBLIC:**

Subscribed and sworn to me this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

(SEAL)

\_\_\_\_\_  
 Signature of Notary Commission Number

My commission expires: \_\_\_\_\_