



TOURIST ORIENTED DIRECTIONAL SIGN (TODS) APPLICATION/PERMIT

Marathon County Highway Department

INSTRUCTIONS:

1. Complete both sides of the application. PLEASE PRINT CLEARLY.
2. Prepare a check for \$300 per sign for the administrative fees. The check is to be made payable to MARATHON COUNTY HIGHWAY DEPARTMENT, 1430 West Street, Wausau, WI, 54401
3. Staple the check to the upper left corner of this application.
4. Send the application and check to the County Highway Commissioner. The application will be reviewed, and the county will contact you with the results. If the application is denied, the check will be returned.

Make Check Payable To:

Mail To:

NAME of Business/Service/Activity:

Street Address, City, State, ZIP Code:

Business/Service/Activity Category for which TODS are Requested (Check ONE):

Gas
 Food
 Lodging
 Camping
 Tourist Attraction

Amenities Available at the Business/Service/Activity:

Restrooms
 Parking
 Drinking Water
 Telephone

Period Business/Service/Activity Operates:

Open All Year
 Seasonal Operation

If Seasonal Operation, Open Each Year:

From (month/day): _____ To (month/day): _____

Hours of Operation:	OPEN	CLOSE	Sign Conflicts: <input type="checkbox"/> Yes <input type="checkbox"/> No 1. Do you have a "White Arrow Board" sign (Ch. Trans 200.03, Wis. Admin. Code) at the intersection of the proposed TODS locations? <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Do you have an outdoor advertising sign, which is not in accordance with s.84.30 Wis. Stats. or Ch. Trans. 201 Wis. Admin. Code? <input type="checkbox"/> Yes <input type="checkbox"/> No 3. Do you have permitted outdoor advertising signs within 1,000 feet of the proposed TODS locations?
Monday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Tuesday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Wednesday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Thursday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Friday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Saturday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	
Sunday	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	

Number of Signs: <input type="checkbox"/> One new TODS (Administrative fee is \$300 payable to the county) <input type="checkbox"/> Two new TODS (Administrative fee is \$600 payable to the county) <input type="checkbox"/> Replace or Repair Existing TODS (Administrative fee is \$300 payable to the county per sign)	Proposed Sign Wording: Fill in the name and the distance from the intersection to the business/service/activity for each TODS requested. Limit the name to one character or space per box.
	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="border-bottom: 1px solid black; width: 80%;"></div> </div> </div> <div style="border: 1px solid black; padding: 5px;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> <div style="border-bottom: 1px solid black; width: 80%;"></div> </div> <div style="border: 1px solid black; padding: 5px;"> </div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px;"> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> </div> </div> <div style="border: 1px solid black; padding: 5px;"> <div style="border-bottom: 1px solid black; width: 80%;"></div> </div> <div style="border: 1px solid black; padding: 5px;"> </div> </div>

TOURIST ORIENTED DIRECTIONAL SIGN (TODS) APPLICATION/PERMIT *(continued)*
 Marathon County Highway Department

PROPOSED SIGN LOCATION INSTRUCTIONS:

1. Label the intersecting roads.
2. Place an arrow in the circle pointing to the North.
3. Check (X) one or two of the boxes corresponding to the proposed sign location(s). TODS are only permitted on Marathon County Highways. They must direct motorists to businesses/services/activities that are located on other County Highways or Town Roads.
4. Place an O (circle) at the approximate location of your business.
5. Write the name of the county in the lower left corner.
6. Write in any additional details or comments that would be helpful in determining the proposed sign location. (Optional)

The diagram shows a four-way intersection of roads. Each road has a box labeled 'Road Name' next to it. There are four checkboxes, one in each quadrant of the intersection. In the top right quadrant, there is a circle with the text 'NORTH ARROW' around it. In the bottom left quadrant, there is a box labeled 'County'.

CERTIFICATION:

I, the applicant, certify that the statements contained on this application/permit are true and correct, and that the business identified is conducted in conformity to all laws applicable to nondiscrimination, and that discrimination is not exercised in regard to race, religion, color, sex, sexual orientation, or national origin. I understand that in addition to the attached administration fee, I am responsible for the manufacturing and installation costs for the proposed sign(s). I understand that this permit is revocable, and that it is subject to renewal every five years. I further understand that if my business is a seasonal operation, I am responsible for notifying the county prior to closing and re-opening, and that a "CLOSED" plaque will be placed on my sign when my business is closed for the season.

Applicant Name (First, MI, Last)
(Area Code) Telephone Number

X _____ (Date – m/d/yyyy)
 (Applicant Signature) (Date – m/d/yyyy)

APPROVAL – APPROVED BY MARATHON COUNTY HIGHWAY DEPARTMENT OR AUTHORIZED AGENT:

Subject to present and continuing compliance by the applicant with all requirements of s.86.196 Wis. Stats. and Chapter Trans. 200.08 Wisconsin Administrative Code, a permit is granted for the TODS sign(s) described. This permit expires on the five-year anniversary date of the installation of the TODS sign panel.

X _____ (Date – m/d/yyyy) **X** _____ (Date – m/d/yyyy)
 (Marathon County Highway Commissioner) (Marathon County Highway Commissioner)

DENIAL – DENIED BY MARATHON COUNTY HIGHWAY DEPARTMENT OR AUTHORIZED AGENT:

Reason:
X _____ (Date – m/d/yyyy)
 (Marathon County Highway Commissioner)

— For MCHD Use ONLY —						
SIGN SIZE		PERMIT NUMBER		INSTALLATION DATE		
<input type="checkbox"/> RURAL (72")	<input type="checkbox"/> URBAN (48")	County	Number	Month	Day	Year
<input type="checkbox"/>	<input type="checkbox"/>					