

Oklahoma Department of Transportation

| For Official Use Only | |
|-----------------------|---------------------|
| Date | Control Section No. |

Application for Highway Beautification Clearance For Junk/Salvage Yards or Metal Processing Facilities

Application is hereby made by the undersigned to have their business inspected by ODOT to ensure compliance with Title 69 O.S., Section 1251 et seq. and with the rules and regulations of the State Transportation Commission.

Part I - Business Owner/Operator Information

| | | | |
|-----------------------------------------------------|-----------------------------------------------------------|----------------------|-------------------------|
| NAME: _____ <i>(Person, Firm or Corporation)</i> | CONTACT: _____ <i>(Name of Primary Contact Person)</i> | | |
| ADDRESS: _____ <i>(Mailing Address)</i> | _____ <i>(City)</i> | _____ <i>(State)</i> | _____ <i>(Zip Code)</i> |
| _____ <i>(Physical Address)</i> | _____ <i>(City)</i> | _____ <i>(State)</i> | _____ <i>(Zip Code)</i> |
| TELEPHONE NO.: _____ | CELL NO.: _____ | | |
| FAX NO.: _____ | E-MAIL ADDRESS: _____ | | |

Part II - Business or Facility Information

| | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------|-------------------------|
| NAME OF BUSINESS: _____ <i>(Also list previous name of business if it was pre-existing.)</i> | | | |
| TYPE OF BUSINESS: <input type="checkbox"/> Junk or Salvage Yard <input type="checkbox"/> Scrap Metal Processing Facility <input type="checkbox"/> Other: _____ | | | |
| ADDRESS: _____ <i>(Mailing Address)</i> | _____ <i>(City)</i> | _____ <i>(State)</i> | _____ <i>(Zip Code)</i> |
| _____ <i>(Physical Address)</i> | _____ <i>(City)</i> | _____ <i>(State)</i> | _____ <i>(Zip Code)</i> |
| TELEPHONE NO.: _____ | DATE BUSINESS WAS ESTABLISHED: _____ <i>(If not yet established, enter intended date)</i> | | |

Location Description:

| | | | |
|----------------------------------|--------------------------------------------------|----------------------------------------------------------|----------------------------------------|
| COUNTY NAME: _____ | CITY NAME: _____ | NEAREST HWY.: _____ | SIDE OF HWY.: _____ <i>N.S.E.W.</i> |
| NEAREST INTERSECTING HWY.: _____ | DIR. FROM INTERSECTION: _____ <i>N.S.E.W.</i> | DISTANCE FROM INTERSECTION: _____ <i>Miles Tenths</i> | DISTANCE FROM R/W: _____ |

Part III - Industrial Area Qualifications

| | |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| Is the property upon which the business is located zoned for industrial use? <input type="checkbox"/> Yes <input type="checkbox"/> No | If property is un-zoned, is the business located within 1,000 feet of an industrial activity? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, a Zoning Confirmation form must be completed & submitted with application. (Form Z-JY or it's equivalent.) | If yes, what is the name of the business? _____ |
| Who is the Zoning Authority? _____ | |

Note to Applicant: If your business is located in an area that is zoned anything other than industrial or is un-zoned and not within 1,000 ft. of an industrial business, then you will need to have any wrecked or inoperable vehicles, parts or junk as defined in Title 69 O.S., Section 1253, screened from view of the highway. If your business is located in such an area and is not yet screened, you will need to submit a site plan that details your screening intentions. Please be sure to list the approximate dimensions of the business and the type of screening that you intend to use.

Signature of Applicant or Representative

Date