



**NEW HAMPSHIRE DEPARTMENT OF TRANSPORTATION  
BUREAU OF TRAFFIC  
LOGO  
MOTORIST SERVICE SIGNING APPLICATION**



*The installation fee of \$350.00 shall be paid, per LOGO sign. Checks shall be made payable to the "Treasurer State of New Hampshire" and attached to the application along with the proposed LOGO design.  
Send to: New Hampshire Department of Transportation  
Bureau of Traffic  
PO Box 483  
Concord NH 03302-0483.*

NAME OF BUSINESS	TELEPHONE
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PHYSICAL ADDRESS OF BUSINESS ( No. Street ) ( City / Town ) ( State ) ( Zip )

CORRESPONDENCE MAILING ADDRESS ( If Different than above )	CONTACT PERSON:
	TELEPHONE:

1. TYPE OF MOTORIST SERVICE ( Check Only One :)  GAS  FOOD  LODGING  CAMPING

BUSINESS LOCATION DATA	2. CLEARLY IDENTIFY ROUTE, EXIT NUMBER & RAMP:				
	3. TRAVEL DISTANCE FROM RAMP TERMINUS:		4. DIRECTION FROM RAMP		
			<input type="checkbox"/> LEFT	<input type="checkbox"/> RIGHT	<input type="checkbox"/> STRAIGHT

OPERATION DATA	5. BUSINESS HOURS:	SPRING	SUMMER	FALL	WINTER
	6. SEASONAL BUSINESSES ( Describe operating season )				
	DATE OPEN:		DATE CLOSED:		

7. IS SUPPLEMENTAL TRAILBLAZING SIGNING NEEDED TO DIRECT MOTORIST TO THE BUSINESS?  YES  NO

IF YES, WHERE ?

8. LIST ALL LOCAL OR STATE LICENSES OR PERMITS:

**I certify that the above information is true and correct and that I will inform the Department of any changes to the above information**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_