

Roadside Memorial Sign Application



Lancaster County
 Engineering Department
 444 Cherrycreek Rd, Bldg. B
 Lincoln, Ne 68528
 402-441-7797
 402-441-6321 (Fax)

County Use Only:

Received: _____
Approval: _____
Location: _____
Installation Date: _____

The regulations governing this program can be obtained from the department shown above.

Please Complete the Following Information:

Applicant Information	
Sponsor/Applicant's Name:	Relationship to the Individual to be Memorialized: *
Sponsor/Applicant's Complete Mailing Address:	Sponsor/Applicant's Email Address:
Sponsor/Applicant's Phone Number:	*If not an immediate family member, please attach written permission from an immediate family member

Individual to be Memorialized and Accident Information	
Name of Individual to be Memorialized (as shown on the accident report):	Location of the Accident: *
Date of the Accident: *	*The County accident report will be reviewed. If necessary, the applicant may be asked to provide a copy of the death certificate

Message to be placed on sign (please check one)	Supplemental Plaque (please check one and fill in the blank) *
<input type="checkbox"/> Please Drive Safely <input type="checkbox"/> Seat Belts Save Lives <input type="checkbox"/> Please Watch for Bicyclists <input type="checkbox"/> Don't Drink and Drive	<input type="checkbox"/> In Memory Of _____ <input type="checkbox"/> Sponsored By _____

* Please spell name **exactly** as it should appear on the sign.

* In the case where application is made for an intoxicated driver (alcohol or any other controlled substance) who was fatally injured, the name plaque shall read "Sponsored by (Family Name or Applicant)" and will not include the driver's name.

One sign will be installed as close to the accident location as possible and will remain in place for three (3) years from the date of initial placement. A one-time extension for another three (3) years may be requested within three (3) years of the date of the Board's resolution approving placement. The applicant may request removal in writing to the Engineer at any time. Following removal, the sign and associated plaques may be sold as surplus County property pursuant to Neb. Rev. Stat. § 23-2115.

Applicant's certification: I certify that the above and foregoing statements are true and correct, and that I have read, understand and agree to abide by the conditions of the Lancaster County Roadside Memorial Sign Program.

Applicant's Signature: _____	Date: _____
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