

NIGER STATE SIGNAGE AND ADVERTISEMENT AGENCY



OFFICE: REVENUE HOUSE, P.M.B 28, OLD SECRETARIAT, MINNA, NIGER STATE.

FIRST PARTY REGISTRATION

FORM A

Please fill every section and submit with relevant documents

1. Name of Applicant/Company _____

2. Office Address in Minna: _____

3. Other Relevant Address: _____

Email: _____ Contact No(s) _____

Whatsapp No. _____ Face Book Address _____

4. LGA /Town where you prefer hoarding _____

5. Purpose of Application

- Application for New Site/Sign
- Upgrading of Existing Site
- GPS Coordinates
- Request for Waiver
- Site Verification

Duration of the Structure

- Temporary (Less than 3 Months)
- 6 Month
- 1 year
- Permanent

6. Type of Structure

- | | | |
|---|---|------------------------------------|
| Aerial/Sky <input type="checkbox"/> | Public Information Panel (PIP) <input type="checkbox"/> | Wall Wrap <input type="checkbox"/> |
| Balloon <input type="checkbox"/> | Poster/Banner <input type="checkbox"/> | other <input type="checkbox"/> |
| BillBoard <input type="checkbox"/> | Roof-Top <input type="checkbox"/> | _____ |
| Canopy <input type="checkbox"/> | Street Walker <input type="checkbox"/> | _____ |
| Construction / Information/Directional <input type="checkbox"/> | Temporary Sign <input type="checkbox"/> | _____ |
| Digital/LED <input type="checkbox"/> | Wall Dripe <input type="checkbox"/> | _____ |
| Electronic <input type="checkbox"/> | Window Display <input type="checkbox"/> | _____ |
| Flag/ Bunting <input type="checkbox"/> | | |

How Many Shops are Within the Premises? _____

Name and Signature of Property owner (Where Sign would be Positioned) _____

Number of Sign required (e.g. 10, 20 or 50 Street Lamp Posts) _____

Dimensions of Sign: (e.g. 48 Sheet, 96 Sheet etc) _____

Specification/Material(e.g Iron, Steel,) _____

Overall Height of Structure: _____

Ground Clearance _____

Format (Tick Appropriately) Portrait Landscape

Viewing Site/Faces of your Structure: One Face Two Face Three Face More (Specify)

Sign Variation (Please Attach Structural Drawings): _____

LED ICONIC ULTRA-WAVE

Illumination/Lighting: NONE INTERNAL EXTERNAL BACKLIT

Interactivity: NONE/STATIC CHANGING FLASHING OTHER

Address of Proposed Sign (Line 1) _____

Address of Proposed Sign (Line 2) _____

LGA /Town Where Sign Would be Located _____

GPS Coordinate _____

Latitude: _____

Longitude: _____

Please Note:

- ✓ **Do Not pay cash or any "Consulting fees" To any Person Claiming to act on behalf of the Agency.**
- ✓ **After the Collection and filling of this form. Return the form for the following check list by the appropriate staff**

- 1. Application Letter
- 2. Completed and certified from A
- 3. Simple Architectural Design
- 4. Photograph of Existing Sign/Structure
- 5. Photograph of Purposed /Structure /sign

FOR OFFICIAL USE ONLY

II. Comments

III. Form received by: NAME: _____

SIGNATURE: _____ **DATE:** _____

Please, pay your Application fee of N2,000 Naira Only through Ebillspay Platform at any Bank

