

Certification of Owner/Operator of E-Sign

I hereby certify that I have received and understand the regulations, restrictions and prohibitions related to Electronic Message Display (EMD) signs and further certify that I will operate such EMD sign(s) in compliance with the County Sign Code regulations Section 27-1405.C.

Print Name

Signature

Location of EMD sign

Date

Mail to:
Planning & Community Services
2825 3rd Ave North, 4th Floor
Billings, MT 59101

Scan & email to:
plnonline@billingsmt.gov

