



# CERTIFICATION OF COMPLIANCE

<input type="checkbox"/>	RESORT
<input type="checkbox"/>	MOTEL
<input type="checkbox"/>	RESTAURANT
<input type="checkbox"/>	OTHER

I (We), the undersigned do hereby certify that this business establishment is licensed by the State Department of Health, as required by Minnesota Statute 157.03.

<input type="checkbox"/>	CAMPGROUND
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I (We), the undersigned do hereby certify that this camping area does possess a State Department of Health License, as required by Minnesota Statutes 327.15, and that the following criteria will be met:

- A minimum of 15 spaces available
- Modern sanitary facilities (flush, chemical, or incinerator toilet) and drinking water available
- Services available 24 hours a day

Further, I (we) do hereby certify that this business conforms with all applicable laws and regulations concerning the provisions for public accommodations without regard to race, religion, color, sex or national origin.

I (We) also certify, in compliance with Minnesota Statutes, that (1) my place of business is not readily visible from the county highway, (2) effective directional advertising is not possible, and (3) no business advertising signs can be legally and effectively located near the intersection.

I (We) do also agree to participate in any additional maintenance and/or sign replacement costs for my specific service sign(s) resulting from damage, vandalism and other such occurrences beyond the control of Hubbard County. In addition, I (we) understand that I (we) will be billed for replacement costs at any time signs must be refurbished due to natural deterioration, normally an 8 to 10 year period. Insofar as possible, Hubbard County will furnish advance written notice of sign replacement costs.

I (We) realize that, according to State Law, I (we) must renew my request for specific services signing every three years.

Where specific service signs are in place, and Hubbard County determines that the highway signing requires upgrading, a credit for the cost will be based on a ten year depreciation schedule.

A closed sign will be included with each specific service sign. I (We) understand that it is my (our) responsibility to install and remove the closed sign for the season.

Installation Time Schedule: Upon the application approval by Hubbard County, the sign(s) shall be installed in approximately six (6) weeks. These signs are special order as Hubbard County does not have fabrication facilities.

I (We) the undersigned herewith accept the terms and conditions of the regulations of the State of Minnesota and Hubbard County and agree to fully comply herewith to the satisfaction of the Hubbard County Highway Department.

Dated: \_\_\_\_\_

Applicant's Signature(s): \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_