



**LAGOS STATE GOVERNMENT**  
**LAGOS STATE SIGNAGE & ADVERTISEMENT AGENCY**

**TEMPORARY APPLICATION FORM**

**₦10,000.00**

INSTRUCTIONS: Please fill ALL portions of this form and submit with other supporting documents (see overleaf) where required.

**PART 1 (APPLICANT INFORMATION & SIGN SPECIFICATIONS)**

NAME OF APPLICANT (COMPANY):		
ADDRESS (LINE1):		
ADDRESS (LINE2):		
NAME OF PRODUCT/SERVICE:		
SITE LOCATION:		
LOCAL GOVERNMENT AREA:	EMAIL:	PHONE NUMBER:
<b>TYPE OF SIGNS</b> <input type="checkbox"/> Moveable Sign <input type="checkbox"/> Gazebos <input type="checkbox"/> Water Advertisement <input type="checkbox"/> Posters <input type="checkbox"/> Flags <input type="checkbox"/> Wall Drapes <input type="checkbox"/> Branded T-Shirts <input type="checkbox"/> Feather sign <input type="checkbox"/> Cart/Trolley/Stand <input type="checkbox"/> Banners <input type="checkbox"/> Inflatable <input type="checkbox"/> Other (Please specify)		
START DATE:		END DATE:

**PART 2: MOVEABLE SIGNS (TRANSIT ADVERTISING SIGNS, ROAD SHOWS AND BRANDED WEARS)**

1. If a transit sign, please supply proof of vehicle license and registration no.	Attached? Yes/No
2. If you are making use of branded clothing/wears, state the number.	
3. Please show by way of a photograph/photomontage, the proposed graphics to be displayed.	Photograph/Photomontage attached? Yes/No
4. What will the duration of display be?	No. of day(s)..... No. of week(s).....
5. Please provide the following details of the proposed sign:	Size of advertisement..... Sqm Dimensions of advert(s) .... m x.....m Illumination: None/Internal/External/Backlit
6(a) Does the sign require or contain any moveable parts animation, make use of a generator, motor or air pump for its display?	Yes/No
6(b) If yes, a traffic statement will be required.	Attached? Yes/No

**PART 3: OTHER TEMPORARY SIGNS (BANNERS, WALL DRAPES, INFLATABLES AND OTHERS)**

1. What type of sign are you applying for?	
3. Please show by way of a photograph/ photomontage, the proposed graphics to be displayed.	Photograph/Photomontage attached? Yes/No
4. What will the duration of display be?	No. of day(s)..... No. of week(s).....
5. Please provide the following details of the proposed sign:	Size of advertisement .....Sqm Dimensions of advert(s).....m x.....m

I, \_\_\_\_\_ (full name) declare that I am the duly authorized agent or owner of the business/ company that has submitted this application to erect a sign. I verify that all information provided above are true and accurate and understand that false or misleading information provided by me in the course of this application will result in the automatic disqualification and attract a penalty which I undertake to pay. I also undertake to obtain the Agency's approval before I implement any changes to any sign approved by the Agency. I agree to notify the Agency of any change in my mailing address, status and/or telephone number.

Signature:

Date:

Name of individual and company presenting this application:

\_\_\_\_\_  
(If a company, please include the full names of the Chief Executive Officer)

**TO BE SIGNED BY THE OWNER OF THE PROPERTY WHERE ERECTION OF SIGN IS PROPOSED:**

The above information has been checked by me and is hereby confirmed to be correct.

Full name: \_\_\_\_\_

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

Capacity: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of Individual/Company/Partnership/Trust (if a Trust Partnership or Company, please include full names of all Trustees/Directors/Partners): \_\_\_\_\_

Telephone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Fax No: \_\_\_\_\_

**CHECKLIST (PLEASE ENSURE THAT THE FOLLOWING IS ATTACHED TO THIS FORM):**

Application fee payment

Photomontage

Vehicle Reg. no. (If branded Vehicle is to be used)

Route Plan (If the campaign is a road show)

**SPECIAL NOTICE: PLEASE DO NOT PAY CASH OR ANY "CONSULTING FEES" TO ANY PERSON CLAIMING TO ACT ON BEHALF OF THE AGENCY. KINDLY NOTE THAT IN THE EVENT OF A CANCELLATION OR CHANGE OF A CAMPAIGN DATE, 20% OF THE TOTAL AMOUNT PAID WOULD BE DEDUCTED AS ADMINISTRATIVE CHARGES**

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