



200 N.E. 21st Street Oklahoma City, OK 73105-3204 (405) 521-3005

May 20, 2024

Billboard Joe, LLC ATTN: Joe Ogden 4205 Richardson Ranch Road Fort Worth TX 76126

> Reject Application for Sign Registration US-169, Tulsa County

Dear Mr. Ogden:

As Derek Vinson discussed with you over the phone, we are unable to process the above referenced application at this time because the proposed sign site does not meet the zoning designation (CS: Commercial Shopping Center District). industrial/commercial type business is not located within 600 ft. of the proposed sign site or the property. With the zoning designation being changed within the last year, and the surrounding properties being zoned "AG", The Transportation Commission will need to see some type of commercial or industrial development take place before we could consider this location applicable for a Class "A" sign permit.

We are returning the application and other pertinent documentation. Derek mentioned that in lieu of returning your payment, you would like for us to retain the payment for another application you have already mailed to us for submission. Therefore, we will not return your application fee and use it towards your next application.

I am sorry that we could not accept your application in this instance but look forward to working with you on future endeavors. If you have any questions or would like to further discuss, please contact this office at (405)521-3005.

Respectfully,

Thomas Davis

Transportation Supervisor

Outdoor Advertising Control

TD:

Enclosures

# OKLAHOMA DEPARTMENT OF TRANSPORTATION APPLICATION FOR SIGN REGISTRATION & PERMIT (See back of form for instructions.)

| FOR      | OFFICIAL USE O   | NLY          |
|----------|------------------|--------------|
| DATE     | 3716<br>OWNER HO | REG NO       |
| \$100.00 | APPLICATION NO.  | SIGN FILE NO |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                          | I FF AMOUN          | T APPLICATION NO.                                          | SIGN FILE NO                          |
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| Part I - SIGN OWNER INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                          |                     |                                                            |                                       |
| 101                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | 102                                      |                     |                                                            |                                       |
| Applicant & Name Billboard Joe, LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | Address:                                 |                     | dson Ranch Road                                            |                                       |
| city Fort Worth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 104           | Texas                                    |                     | os<br>Code: 76126                                          |                                       |
| 106                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | , Texus                                  | 108                 | 1. 5 pt. 30 - 1 ve. 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |                                       |
| Telephone No 918   629-9956 Fax No 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |                                          | Emnil Address: _    | joe@billboardjo                                            | oe.com                                |
| Part II - LOCATION OF SIGN SITE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                          |                     |                                                            |                                       |
| 201 202 203                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3             |                                          | 204                 |                                                            |                                       |
| ocated Side Country I Have E Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | , lilles      |                                          | City                | jus t south of Coller                                      | sville                                |
| on Hwy. 109 of Hwy∴ E Name NSEW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | :             |                                          | Name:               | jost south gjednet                                         | isvine .                              |
| 206                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | 207                                      |                     | 208                                                        |                                       |
| ntorageting Hays. 20 Intersection: S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               | Distance from                            | ~ 1.2 mil           | Distance from                                              | 15 ft                                 |
| The section of the se | EW            | ntersection:                             | Milos & Tonths      | Alght-of-Way:                                              | Foot                                  |
| 209                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                                          | inios a rontiis     | 05 000005                                                  |                                       |
| SPS Coordinates: Latitude: 36, 347562                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               | 1.                                       | ongitude:           | -95, 820335                                                |                                       |
| Part III - LAND OWNER INFORMATION (No. A66                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | igned:        | 17750                                    | )                   |                                                            |                                       |
| and Owner's Name: Champion Investment G                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | roun IIC      | 503                                      | 10025 E 1           | 36th C+ N                                                  |                                       |
| and Owner's Name: Champion investment of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | oup, LLC      | Addres                                   | 55: 10023 E 1       | .50 31 14                                                  |                                       |
| 303                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               | 304                                      | Old-I               | 305 740                                                    | 24                                    |
| Collinsville                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               | State:                                   | Oklahoma            | Zip Code:                                                  | 21                                    |
| 0.0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                                          |                     |                                                            |                                       |
| 06<br>elephone No ( 918 ) 857-6070                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               | 307                                      | clossed at any      | i use consent? LY                                          | e Cho                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | Have you en                              | Torea broot of tand | 1 080 COURSUIT DO 10                                       | 2 17140                               |
| Part IV - PHYSICAL DESCRIPTION OF SIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                                          |                     |                                                            |                                       |
| 101                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |                                          | 2.4                 | Overall Height                                             | 70                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |                                          |                     | Above Ground:                                              | /UII.                                 |
| (Can not exceed 25 ft.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               | (Can not ex                              | ceed 60 H.)         | (No limit I                                                | Dy 61310)                             |
| VPE OF SIGN: Single Side-by-Side                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Stacked       | [] V. (vn                                | iXi Back-to         | Back [] Tri-Vision                                         | (Rotatino State)                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | n not exceed                             |                     |                                                            | , 3 -7                                |
| 03 404                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |                                          |                     |                                                            |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MINATED?      | X YES                                    | NO I! yes. will it  | be an LED display? (                                       | J YES LY NO                           |
| (Advertising Displays)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | LOUALISI      | 2121210 (                                |                     |                                                            | 21 A BII                              |
| Part V - ZONING AND COMMERCIAL/INDUSTRIA<br>However if applying for a Class C (Inform                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                                          |                     |                                                            | JIBSS A PERMIT.                       |
| ZONED AREA ONLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ational) i c  | mm. una ac                               |                     | NZONED AREA ONLY                                           |                                       |
| 01 - Is proposed location zoned? IX YES INO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |                                          |                     | location within 600 ft                                     | of a conforming                       |
| Ill answer is no. then go directly to item 505.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                                          |                     | (Refer to OAC §730:35                                      |                                       |
| 02 - What is the zoning designation? CS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |                                          |                     | ☐ YES ☐ NO                                                 |                                       |
| (Must be some type of commercial, industrial or bu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | isinesa desii | justion )                                | 506 · What is the   | name of the business                                       | ?                                     |
| 103 - Who is the zoning authority? Tulsa Cour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ity           |                                          |                     |                                                            |                                       |
| 04 If the area is zoned, a Zoning Confirmation from m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ust be comp   | oloted and                               | 507- Please atta    | ch a diagram depicting                                     | the layout of the                     |
| attached. (Form OAC Z-504 or its equivalent.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                                          | na gaenland         | nd the proposed sign s                                     | ile.                                  |
| A VI A AVINOUII COONEUZ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | -             |                                          |                     |                                                            |                                       |
| art VI - ACKNOWLEDGMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | lam to occide |                                          | g control? (X) Y    | 169-72-91                                                  | DIV 8                                 |
| ave you read all of the statutes and regulations pertain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ing to outdo  | or advertisin                            | g control / W Y     | 25 100 12 01                                               |                                       |
| EMARKS:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |                                          |                     |                                                            |                                       |
| ATE OF: Texas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |                                          |                     |                                                            |                                       |
| unty of: TARRANT 5                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |                                          |                     |                                                            |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | wful age and  | first duly sw                            | om upon oath dep    | oses and states the fol                                    | lowing:                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •             |                                          | •                   |                                                            | • • • • • • • • • • • • • • • • • • • |
| n behalf of inyself (or) X as authorized the foregoing information and that the facts set out if                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |                                          |                     |                                                            |                                       |
| d the foregoing information and that the facts set out ti                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |                                          | •                   |                                                            |                                       |
| 1, , , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               | HILA ANVIOR                              | ILIC:               | s Keth day of Me                                           | 9 2024                                |
| $IX \subset V$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ,             | Ay commissi                              | on expires: 11/14   | COZG GRY OF L                                              | 7 2024                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               | ,                                        |                     | 9                                                          |                                       |
| niture of Applicant or Representative                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                                          |                     | 5                                                          |                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5             | Signature of I                           | lolary              | (ALL)                                                      | MARC                                  |
| RM AP-100 2/2012                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               | - 100 mm 2 | -                   | (20)                                                       | Notary I                              |

MARCOS A SOLIS
Notary ID #131799650
My Commission Expires
November 16, 2026

# OKLAHOMA DEPARTMENT OF TRANSPORTATION APPLICATION FOR SIGN REGISTRATION & PERMIT (See back of form for instructions.)

| FOR OFFICIAL USE ONLY |                 |               |  |  |
|-----------------------|-----------------|---------------|--|--|
| DATE                  | 3771            | REG. NO.      |  |  |
| \$100.00              | APPLICATION NO. | SIGN FILE NO. |  |  |

| Part I - SIGN OWNER INFORMATION                                                                                                                                                                            |                                       |                                |                                                                               |                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------------------------|-------------------------------------------------------------------------------|----------------------|
| 101<br>Applicant's Name: Billboard Joe, LLC                                                                                                                                                                | 102                                   | 4205 Pichar                    | dson Ranch Road                                                               |                      |
| 103                                                                                                                                                                                                        | Address:                              | 10                             | 5                                                                             |                      |
| City: Fort Worth                                                                                                                                                                                           | State: Texas                          | 108                            | Code: 76126                                                                   |                      |
| Telephone No. (918) 629-9956 Fax No. (                                                                                                                                                                     |                                       | Email Address:                 | joe@billboardj                                                                | oe.com               |
| Part II - LOCATION OF SIGN SITE  201 202 203  Located County of Hwy.: E Name:                                                                                                                              | Tulsa                                 | 204<br>City<br>Name:           | just south of Colle                                                           | nsville              |
| 205 Nearest Intersecting Hwy.: 20 Intersection: S                                                                                                                                                          | 207<br>Distance from<br>Intersection: |                                | 208<br>Distance from<br>Right-of-Way:                                         | 15 ft<br>Feet        |
| GPS Coordinates: Latitude: 36 347562                                                                                                                                                                       |                                       | ongitude:                      | -95, 820335                                                                   |                      |
| Part III - LAND OWNER INFORMATION (No. Assigne                                                                                                                                                             | 11100                                 | )                              |                                                                               |                      |
| Land Owner's Name: Champion Investment Group                                                                                                                                                               | p, LLC 302<br>Addre                   | ss: 10025 E 1                  | 36 <sup>th</sup> St N                                                         |                      |
| 303<br>City: Collinsville                                                                                                                                                                                  | 304<br>State:                         | Oklahoma                       | 305<br>Zip Code:740                                                           | 21                   |
| 306                                                                                                                                                                                                        | 307                                   |                                |                                                                               |                      |
| Part IV - PHYSICAL DESCRIPTION OF SIGN                                                                                                                                                                     | Have you en                           | closed proof of land           | i use consent? 🔯 Y                                                            | ES NO                |
| 401 DIMENSIONS: Height of Facing: 10 (Can not exceed 25 ft.) 402 TYPE OF SIGN: Single Side-by-Side Sta                                                                                                     | (Can not ex                           | kceed 60 ft.)<br>oe ⊠ Back-to- | Overall Height Above Ground: (No Ilmit                                        | by state)            |
| NO. OF PANELS: 4 WILL SIGN BE ILLUMIN (Advertising Displays)                                                                                                                                               | ATED? X YES                           | NO If yes, will it             | be an LED display?                                                            | □ YES 🛛 NO           |
| Part V - ZONING AND COMMERCIAL/ INDUSTRIAL OF However if applying for a Class C (Information ZONED AREA ONLY                                                                                               |                                       | ection does not a              |                                                                               | Class A Permit.      |
| 501 - Is proposed location zoned? [X YES  NO (If answer is no, then go directly to Item 505.) 502 - What is the zoning designation? CS (Must be some type of commercial, industrial or busing Tulsa County | ess designation.)                     | 505 - Is proposed business?    | d location within 600 f<br>(Refer to OAC §730:3<br>YES NO name of the busines | 5-5-12[a][2])        |
| 504 – If the area is zoned, a Zoning Confirmation from must attached. (Form OAC Z-504 or its equivalent.)                                                                                                  | be completed and                      |                                | ch a diagram depictin<br>nd the proposed sign                                 |                      |
| Part VI – ACKNOWLEDGMENT<br>Have you read all of the statutes and regulations pertaining                                                                                                                   | to outdoor advertisin                 | ng control? 🛛 Y                | ES 169-                                                                       | 12-0                 |
| REMARKS:                                                                                                                                                                                                   |                                       |                                |                                                                               |                      |
| STATE OF: Texas  County of: Second A Order                                                                                                                                                                 |                                       |                                |                                                                               |                      |
| Joseph A. Ogden being of lawful  I, on behalf of myself ( or )X as authorized read the foregoing information and that the facts set out there                                                              | epresentation of the                  | organization listed            | oses and states the fo                                                        | o attest that I have |
| the facts set out there are the facts set out there                                                                                                                                                        | NOTARY PU<br>Subscribed               | BLIC:                          | s day of                                                                      |                      |
| Signature of Applicant or Representative                                                                                                                                                                   |                                       |                                |                                                                               |                      |
| FORM AP-100 2/2012                                                                                                                                                                                         | Signature of                          | Notary                         |                                                                               |                      |



### **General Information**

**Account Number** R92433243365950 Situs Address **Owner Name** CHAMPIONS INVESTMENT GROUP LLC 10025 E 136TH ST N **Owner Mailing** Address COLLINSVILLE, OK 740215316 Land Area 5.16 acres / 224,919 sq ft **Market Value** \$65,100 Last Year's Taxes \$815.42 Subdivision: UNPLATTED (92433) Legal: BEG 421.57S NEC W/2 NW NE TH S897.76 W439.35 Legal Description CRV RT 563.44 NE440.61 POB SEC 33 22 14 5.163ACS

Township: 22



| neger ( |         |      |
|---------|---------|------|
| 12V     | nformat | IOD  |
| IGA     | mormat  | 1011 |

| 2022       | 2023                                                                              | 2024                                                                                                                                           |
|------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| \$65,100   | \$65,100                                                                          | \$65,100                                                                                                                                       |
| \$65,100   | \$65,100                                                                          | \$65,100                                                                                                                                       |
|            |                                                                                   |                                                                                                                                                |
| \$7,161    | \$7,161                                                                           | \$7,161                                                                                                                                        |
| \$0        | \$0                                                                               | \$0                                                                                                                                            |
| \$7,161    | \$7,161                                                                           | \$7,161                                                                                                                                        |
| CL-6A      | CL-6A                                                                             | CL-6A                                                                                                                                          |
| 113.770000 | 113.870000                                                                        | 113.870000                                                                                                                                     |
| \$815      | \$815                                                                             | \$815                                                                                                                                          |
| 2/2/2022   | 2/2/2022                                                                          | 2/2/2022                                                                                                                                       |
|            | \$65,100<br>\$65,100<br>\$7,161<br>\$0<br>\$7,161<br>CL-6A<br>113.770000<br>\$815 | \$65,100 \$65,100<br>\$65,100 \$65,100<br>\$7,161 \$7,161<br>\$0 \$0<br>\$7,161 \$7,161<br>CL-6A CL-6A<br>113.770000 113.870000<br>\$815 \$815 |

Section: 33

### **Values**

Range: 14

|                          | 2022     | 2023     | 2024     |
|--------------------------|----------|----------|----------|
| Land Value               | \$65,100 | \$65,100 | \$65,100 |
| Improvement Value        | \$0      | \$0      | \$0      |
| Fair Cash (Market) Value | \$65,100 | \$65,100 | \$65,100 |
|                          |          | •        | -        |

### **Exemptions**

| Homestead               |
|-------------------------|
| Additional Homestead    |
| Senior Valuation Freeze |
| Veteran                 |
|                         |

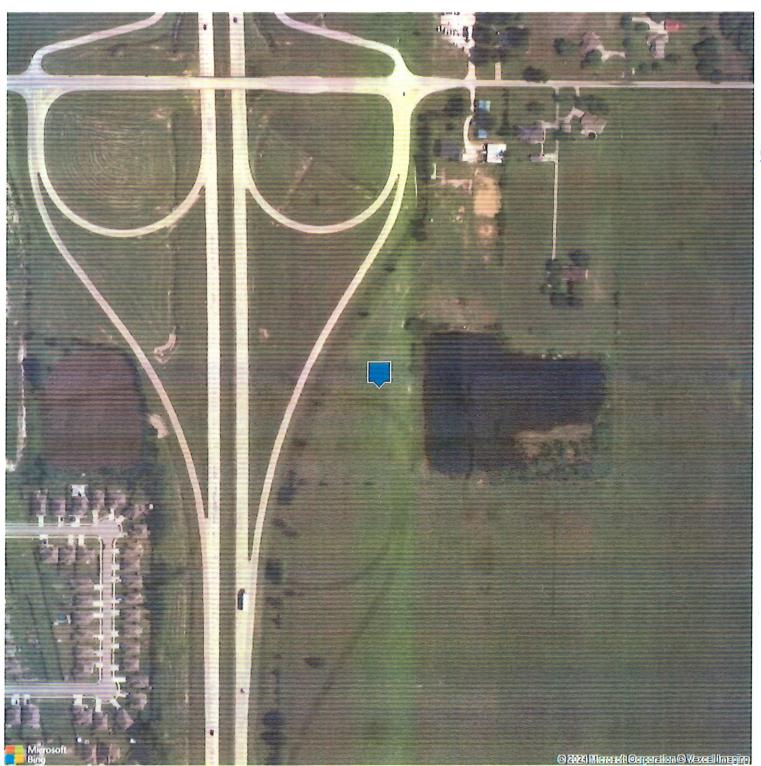
| 2022 | 2023 | 2024 |
|------|------|------|
| -    | -    | i-   |
| -    | -    | -    |
| -    | -    | -    |
| -    | -    | -    |

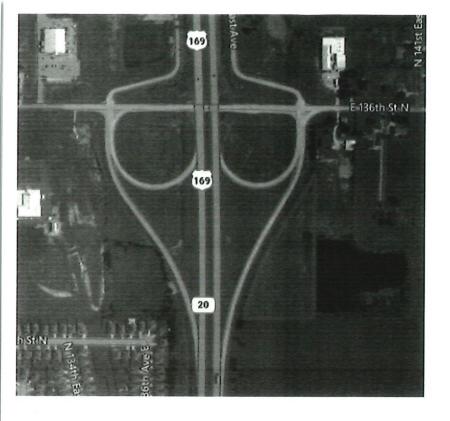
## **Current Improvements**

There are no current improvements for this account.

### **Recent Sales**

| Sale Date | Grantor                            | Grantee | Sale Price | Doc Type        | Book-Page/Doc# |
|-----------|------------------------------------|---------|------------|-----------------|----------------|
| 6/14/2021 | $I(I)KI \Delta H(I)M\Delta (I)(I)$ |         | \$65,078   | Quit Claim Deed | 2021071248     |





### Land Lease Agreement For Outdoor Advertising Structure

Lease No. 23070801

1. This agreement is made between Champion Investment Group LLC as Lessor, and Ogden Resources of Oklahoma, a Limited Liability Company, as Lessee. In consideration of \$25.00 in hand paid with the execution of this agreement. Lessor hereby leases to Lessee as much of the premises at Tulsa County Parcel ID 92433-24-33-65950, with legal description: BFG 421.578 NEC W/2 NW NF TH 8897.76 W439.35 CRV R1 563.44 NE440.61 POB SLC 33-22-14-5.163ACS (Section: 33 Township: 22 Range: 14) as reasonably necessary for the construction, repair and maintenance of one (1) advertising structure and supports, with the right of access to, by Ogden Resources employees, contractors and vehicles and the right to maintain advertisements on such structure from the 10th day of July, 2023-1.

- The Lessee shall indemnify and hold Lessor harmless from and against any and all suits, claims, action, demands or damages arising out of or occurring in connection with the advertising structure
- 4 Lessor agrees that neither she, her tenants, agents, employees or other persons acting on Lessor's behalf shall place or maintain any object which would obstruct or impair the view of Lessee's advertising structure and further agrees that Lessee may cut and remove certain vegetation that might obstruct the structure's view from the roadway.
- 5. All structures placed upon the premises by the Lessee are the Lessee's personal property and shall always remain the same. Lessee shall have the light to remove such signs, structures and improvements upon termination or expiration of the Lease.
- 6 This agreement shall terminate with fifteen (15) days written notice at the option of the Lessee if the Lessee is prevented by authorities having jurisdiction from constructing and/or maintaining its structure of if Lessee is unable to obtain any advertisers for a twelve (12) consecutive month period.
- 7 Lessee shall have the option to continue this lease in full year like terms under the same terms and conditions of being that the Lessee shall at the times of executing additional TWO HI NDRID DOLLARS (\$200.00) per not of say the monthly lease payment will increase from I month to ONI THOUSAND DOLLARS (\$1,000.00) per so on with each option period, should Lessee exercise exercising its option by paying Lessor with the routine me.
- Lessor warrants that it has full right, power and authority to execute and grant this lease and has good title to the property and that the legal owner of the property is Lessor. Lessor further warrants that

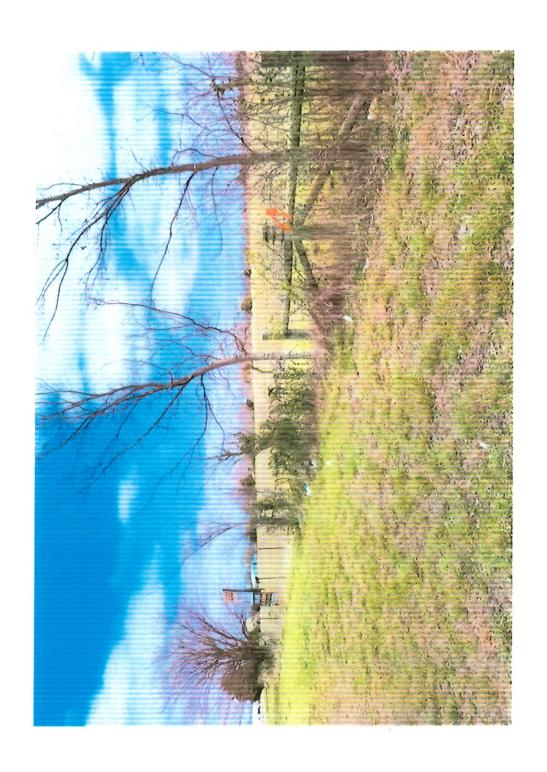
Lease No. 23070801

Lessee shall have the quiet enjoyment of the property and Lessor has the right to grant Lessee free access to the premises at any time to perform any acts necessary to carry on Lessee's business.

- 9. This Lease constitutes the entire agreement between the Lessee and Lessor and supersedes prior written or oral understandings, commitments, agreements or contracts between the parties. The terms and conditions of this Lease Agreement shall be binding upon the parties and shall inure to the benefit of their heirs, successors and assigns. It is expressly understood that the Lessee and/or Lessor are not bound by any stipulations, representations or promises not written or printed on this agreement.
- 10. Lessor and Lessee shall have the right to sell, assign or sublease its rights under this agreement.
- 11. Other provisions:
  - 11.1. The parties agree that no advertising media shall be displayed at any time and in any way depicting any form of "Adult Entertainment," including but not limited to strip clubs, gentlemen's clubs, massage parlors, adult movie houses and other recognized forms of Adult Entertainment.
- 12. This agreement shall be governed by, construed and enforced in all respects in accordance with the laws of the State of Oklahoma.

IN WITNESS WHEREOF, the parties have executed this agreement as of the date written below.

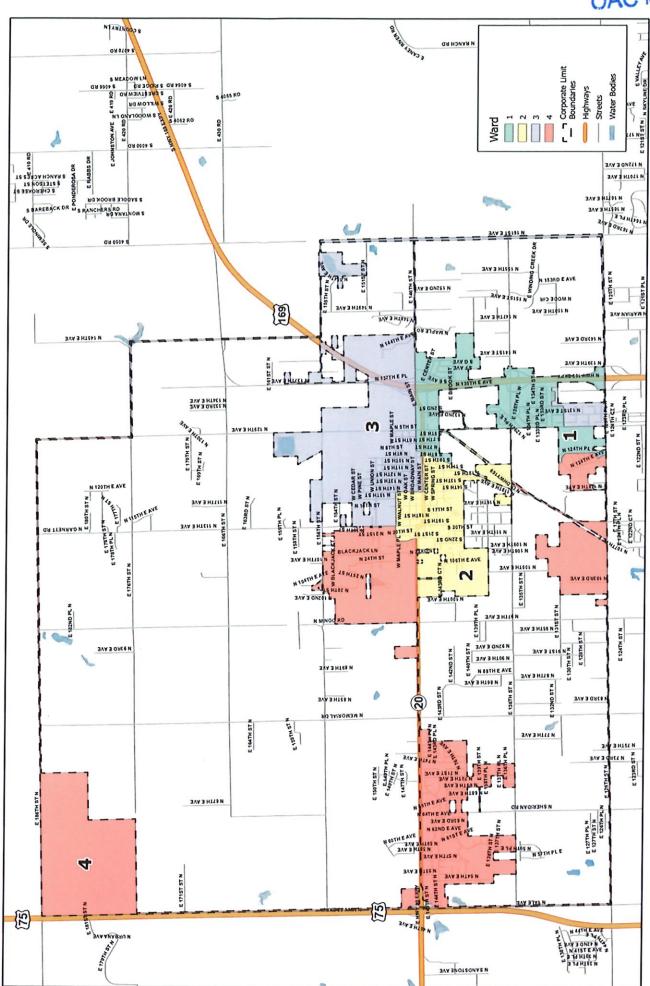
| LESSEE: Ogden Resources of Oklahoma, LLC P.O. Box 2505 Claremore, OK 74018 | LESSOR:<br>Champion Investment Group LLC<br>10025 E 136 <sup>th</sup> St N<br>Collinsville, OK 74021                           |
|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| By: Joseph A. Ogden Date: July 10, 2023                                    | Don Hutchinson Date: July 10, 2023                                                                                             |
| STATE OF OKLAHOMA ) COUNTY OF TULSA )                                      | S.                                                                                                                             |
| Lessor                                                                     | before me this 10 <sup>th</sup> day of July, 2023 by Don Hutchinson  OTARY PUBLIC Commission No. 0201698                       |
| My Commission Expires: 7/11/26                                             | DARRELL T. WHITE, JR.  Notary Public in and for the  State of Oklahoma  Commission # 02011698  My Commission expires 7/11/2026 |



1.8 Miles

6.0

INCOG



# **Collinsville Council District Ward Boundaries**

Current Time: 11/30/2023 11:24 AM Source: 2020 Census - PL94-171 Redistricting Data File Adopted by Ordinance #1009 October 17, 2022