Township Annual Sign Maintenance and Inspection Form

Township: _____

County: _____

Year: _____

Sign ID	Sign Code	Sign Panel Legend	Size	GPS Lat.	GPS Long.	Action	Reason	Comments	Date

Date of Annual Inspection:_____

General Comments:

The Town of _____ **certifies that the road signs described in this form have been inspected and maintained for inspection year** _____ **pursuant to the retroreflectivity requirements set forth by the Federal Highway Administration (FHWA) and sign requirements set forth by the current Minnesota Manual on Uniform Traffic Control Devices (MMUTCD).**

_____

SIGNATURE- TOWNSHIP CHAIRPERSON **DATE**