



MDT-MAI-009 Rev. 04/21

# Montana Department of Transportation Adopt A Highway Application for Participation (Print Version)

The Montana Department of Transportation will work with the adopting group to determine the specific section of roadway to be adopted. Such factors as width of right-of-way, geometrics, congestion and reduced sight distance of roadway may be considered by the Department in determining what highways shall be eligible for adoption.

**New Application**       **Renewal**       **Short Term**

### Organization Information

Name   
Address   
City  ST  Zip   
Phone

### Contact Information

First Name  Last Name   
Email   
Phone

### Highway Section Adopting

Route   
Corridor   
Begin Milepost  End Milepost

12X36 Sign  
Max 14 Characters Per Line  
(For New Applications Only)

### MDT Local Office (Choose One)

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> <b>Kalispell</b> AAH Coordinator<br>Box 7308<br>Kalispell, MT 59904-0308 | <input type="checkbox"/> <b>Great Falls</b> AAH Coordinator<br>Box 1359<br>Great Falls, MT 59403-1359 | <input type="checkbox"/> <b>Billings</b> AAH Coordinator<br>Box 20437<br>Billings, MT 59104-0437    | <input type="checkbox"/> <b>Miles City</b> AAH Coordinator<br>217 N 4th<br>Miles City, MT 59301             |
| <input type="checkbox"/> <b>Missoula</b> AAH Coordinator<br>Box 7039<br>Missoula, MT 59807-7039   | <input type="checkbox"/> <b>Havre</b> AAH Coordinator<br>1649 Highway 2 NW<br>Havre, MT 59501-3455    | <input type="checkbox"/> <b>Lewistown</b> AAH Coordinator<br>50 Airport Road<br>Lewistown, MT 59457 | <input type="checkbox"/> <b>Wolf Point</b> AAH Coordinator<br>200 E Highway 25<br>Wolf Point, MT 59201-9001 |
| <input type="checkbox"/> <b>Butte</b> AAH Coordinator<br>Box 3068<br>Butte, MT 59702-3068         | <input type="checkbox"/> <b>Bozeman</b> AAH Coordinator<br>Box 3028<br>Bozeman, MT 59772-3028         |   |   |

I have read and agree to the Agreement Terms and Conditions for participation in MDT's Adopt a Highway Program

Signature  Date

### To be filled in by Department of Transportation Personnel

Agreement Start Date  Agreement End Date   
 Highway Section Requested Approved       Highway Section Requested Not Approved  
Maint. Crew #  Alternative Route Assigned   
Notes:

Maintenance Chief Signature \_\_\_\_\_ Date \_\_\_\_\_