

Permit No.

## Heavy Load Permit (10 tons or greater)

Date		,	
Road Name and/o	or Road No.		
Work Location (ro	ute to be used- posted bridge	s)	-
Contact Informat	ion		
Permit applicant/re	esponsible party		
Timber/Business/I	_and Owner		
Company/Contrac	etor Hauling		
Responsible Party/Person Contact Name		Email	
Address			
Office Phone	Mobile/Pager	r Office Fax	-
Starting Date	Ending Date	Length of road to be bonded	(mile)
Material to be hau	led:	No. of trucks operating	
I certify the information	tion supplied above is correct an	d the requirements will be obeyed	
Printed Name	Title	Signature	
Bonding rate is \$12,5 Permit shall be issued A copy of the approve Responsible party sha Disregard of the perm Permit holder must ac Permit holder must co	it or limits may result in fines, permi	ulation ermit may be cancelled at any time that exceeds the weight limits a result of work authorized by the permit it cancellations, or denial of future requests 10 days of completion of work that hauling is ich may include calcium chloride	·
		p Use Only	
Pre-Inspection	Post Inspection		
Received	Public Works Director	Zone No	
Approved by		Date	