

CLINTON COUNTY ROAD COMMISSION SINGLE MOVE PERMIT

****Permits are to be paid at the time of application, find our credit card processing form on our website****

	Permit Number:	
\$50 Per Trip	Move Date:	
\$100 Round Trip	Expiration Date:	

As owner, I (we) hereby request permission to transport the following oversize and/or overweight vehicle(s) on the roads under the jurisdiction of the road commission and attest that these loads do not exceed the maximum allowed as listed below:

APPLICANT _____ ADDRESS _____
 CITY/STATE/ZIP _____
 CONTACT PERSON _____ EMAIL _____
 PHONE _____ FAX _____

It is understood this Single Move Permit is being issued for vehicles with the following axle loading or overall dimensions and that exceeding these limits will **VOID** the permit. Failure to follow the Rules and Regulations will **VOID** the permit.

Power Unit No.		Make/Model/Year	
License No.		VIN No.	
Overall Width		Overall Length	
		Vehicle Width	

Axle Number	Axle Weight in Pounds Loaded Vehicle	Number of Tires and Pneumatic Tire Size	Axle Spacing in Feet and Inches	
			ft.	in.
1			1 to 2 axles	6 to 7 axles
2			ft.	ft.
3			2 to 3 axles	7 to 8 axles
4			ft.	ft.
5			3 to 4 axles	8 to 9 axles
6			ft.	ft.
7			4 to 5 axles	9 to 10 axles
8			ft.	ft.
9			5 to 6 axles	10 to 11 axles
10			ft.	ft.
11			Total Number of Tires	Total Number of Tires
TOTAL				

Load Description: _____

Route is as follows: _____

If the proposed move utilizes state highways or city streets, permission must be obtained from the state or local authorities.

CLINTON COUNTY ROAD COMMISSION Approved by: _____

