

OVERWEIGHT / OVERSIZE PERMIT APPLICATION

1/2019



City of Marshfield – Engineering Division
 207 West 6th Street
 Marshfield, WI 54449
 Telephone: (715) 486-2034

Permit Number:

Authorized Signature:

Section A – Applicant Please print clearly or type.

| | | | | |
|----------------------------|-----------|------------------|-------|----------|
| Applicant: | | Desired Date(s): | | |
| Vehicle Owner or Lessee: | | Mailing Address: | | |
| Contact Name: | Phone No. | Mailing Address: | | |
| Company Requesting Permit: | | City | State | Zip Code |

Section B – Vehicle Information

| | | | | |
|--------------------------|-------------------|-----------------|------------|-------|
| Vehicle Type: | Load Information: | | | |
| Dump Truck: | Hauling: | Fill | Aggregates | Other |
| Truck Tractor – Trailer: | Single Load: | Multiple loads: | | |
| Other: | | | | |

Section C – Size

| | Power unit | | Towed Vehicle | | Load | | Overall | |
|--------|------------|-----|---------------|-----|------|-----|---------|-----|
| | Ft. | In. | Ft. | In. | Ft. | In. | Ft. | In. |
| Length | | | | | | | | |
| Width | | | | | | | | |
| Height | | | | | | | | |
| Other | | | | | | | | |

Section D – Axle Weight and Spacing – Tires – By Axle, front to rear

| Axle Number | 1 (front) | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|---|-----------|---|---|---|---|---|---|---|---|
| Number of Pneumatic Tires | | | | | | | | | |
| Requested gross axle weight loaded (Lbs.) | | | | | | | | | |
| Spacing Between Axles (Ft. In.) | | | | | | | | | |

Section E – Trip Information Time Requested / Fee

Permits requested in < 3-Business Days – Double Permit Fee

| | | | |
|-------------------------|--------------------------------------|---------------------------------------|--|
| Single - \$ 5.00 | Day - \$ 20.00 Multiple Loads | Week - \$ 40.00 Multiple Loads | Month - \$ 80.00 Multiple Loads |
|-------------------------|--------------------------------------|---------------------------------------|--|

Section F – Route Information *Shortest Route for non-truck routes whenever possible.*

Comments or changes to the proposed permit / route *FOR DEPARTMENT USE ONLY*

Acceptance of Conditions: I certify that the statements contained in this application are true and correct and that I will comply with all terms and conditions. Municipal Code Sec. 8-42 & 8-46 of The City of Marshfield, and amendments thereto, and in accordance with the rules, regulations, specifications and restrictions of the City Engineer.

X _____
 (Applicant) (Date)

Note: A copy of this permit must be in the vehicle to be valid for the dates issued. The City reserves the right to deny, revoke or postpone approval of the permits should road conditions warrant or at any time the City so chooses. Overweight permits shall not supersede seasonal weight restrictions.

Note: The City of Marshfield Heavy Truck Routes are denoted by yellow painted sign posts.