

TOWN OF AUBURN OVERSIZE LOAD PERMIT

Single Trip Application Permit
 3 day Recurring Trip Application Permit
 Un ending Application Permit

3826 State Highway 64, Bloomer, WI 54724

Phone: (715)828-2029

TO BE COMPLETED BY APPLICANT

For the transfer of a nondivisible load exceeding the statutory size and /or weight limits. This form cannot be used for transferring mobile homes or module building sections. Trip Permits are issued by Chippewa County Highway Department authorized personnel only and authorizes movement **ONLY** on Chippewa County Trunk Highways. Complete ALL sections; any incomplete applications will be returned without processing. If item does not apply, please indicate as such.

APPLICANT: Owner or Lessee of Towing Vehicle (not supplier or consumer)

Name:		Insurance Company:	
Address:		Address:	
City:		City:	
State:	Zip Code:	State:	Zip code:
Telephone:		Policy Number:	
Fax:		Policy Expiration Date:	

Load- Article(s) Transported

VEHICLE INFORMATION (Towing Vehicle)

<input type="checkbox"/> Truck	<input type="checkbox"/> Tractor	<input type="checkbox"/> Other
Make:		Number of Axles:
License/ID Number:		State of Registration:

VEHICLE INFORMATION (Unit in Tow)

<input type="checkbox"/> Fifth Wheel	<input type="checkbox"/> Regular Tr	<input type="checkbox"/> Dollies	<input type="checkbox"/> Other
Make:		Number of Axles:	
License/ID Number:		State of Registration:	

PERMIT REQUESTED FOR:

Overlength 65'
 Overwidth 8'6"
 Overheight 13'6"
 Overweight 80,000#

Size	Length		Width		Height		Weight	DATE/TIMES OF TRANSFER
	Feet	Inches	Feet	Inches	Feet	Inches	Pounds	Date of Move
Load								Approx. Times of Transfer
Towing Vehicle								
Towed Vehicle								
Overall								

TRIP INFORMATION:

Route Loaded Trip	From City, Village, Township	Via Highways:
	To City, Village, Township	
Route Requested	From City, Village, Township	Via Highways:
	To City, Village, Township	

Acceptance of Conditions: I, the applicant, certify that the statements contained in the application are true and correct, and that if granted a permit, I will comply with all terms and conditions which apply. I further agree that this permit shall remain with the towing vehicle during the actual transfer.

(Applicant or Authorized Agent)

(Date)

AUTHORIZATION/SPECIAL CONDITIONS FOR ISSUANCE OF PERMIT:

Permit Effective Date:	Permit Expiration Date	Special Conditions
Name		
Position		
Date:		