

TOWN OF ERIN Roads Department 5684 Trafalgar Road Hillsburgh, ON NOB 120 Phone: 519-855-4407 ext. 262 Fax: 519-855-4281 www.erin.ca

Permit #_

OVERSIZED LOAD PERMIT APPLICATION

(Highway Traffic Act, R.S.O 1990, Section110)

- > THIS PERMIT MUST ACCOMPANY VEHICLES
- ➢ INSURANCE CERTIFICATE WITH TOWN OF ERIN NAMED AS ADDITIONAL INSURED AND COPY OF APPLICABLE MTO PERMITS MUST BE SUBMITTED AT TIME OF APPLICATION.

Applicant:	M	OVING FIRM:
NAME:	NA	ME:
Address:	At	DDRESS:
Сіту:	Cr	Y:
PROV/POSTAL CODE:	Pr	OV/POSTAL CODE:
PHONE: FAX:	Рн	ONE: Fax:
Email:	EN	1AIL:
LOAD INFORMATION:		
HEIGHT WIDTH	LENGTH	WEIGHT
ROUTE AND TIME OF MOVE:		
Town Road(s)		
Date and Destination of move:		
TERMS AND CONDITIONS:		
the applicant to the above terms and condition	ons	
DEPOSIT RECEIVED: \$1000.00 (PAYABLE TO THE TOWN OF ERIN) DATE: INITIAL: PERMISSION is hereby granted subject to description of load/date/route specified on this form and subject to the applicant's acceptance of the terms and conditions signed for above.		
		DD/MM/YR
ROAD SUPERINTENDENT		DATE OF ISSUE