

# RILEY TOWNSHIP

(Sandusky County Ohio)

3109 State Route 412

Fremont, Ohio 43420

## Regional Hauling Permit

### OVERWEIGHT / OVERSIZE VEHICLE PERMIT APPLICATION & PERMIT

*("Permit" is Valid only when signed/authorized by Permitting Authority)*

Applicant Name - Owing Company or Contractor			Application Date		
Address			Contact Person		
City	State	Zip	Telephone Number		
FEIN	<input type="checkbox"/> ICC-MC <input type="checkbox"/> DOT	No.	Fax Number or E-mail		

Load - Description (include make and model or serial number)						<input type="checkbox"/> Towed <input type="checkbox"/> Loaded	<input type="checkbox"/> Self-Propelled	<input type="checkbox"/> Various Trailers
Vehicles	Make	Plate No. and State	Empty Wt.	No. of Axles	Sizes	Length	Width	Height
Power-Unit					Power Unit			
Trailer #1					Trailer #1			
Trailer #2					Trailer #2			
Load Weight		Total Gross Weight	Load + Empty Weights		Load			
LBS.		LBS.	LBS.		Overall			

#### COMPLETE IF OVERWEIGHT

Axle Number	1	2	3	4	5	6	7	8	9
Axle Weight									
Number of Tires on Axle									
Tire Width									
Spacing Between Axles									

#### ROUTING INFORMATION

From: (Intersection or Address)	To: (Intersection or Address)
VIA Highways / Roads	
Township Comments:	

#### Type of Permit Requested: (Check All Applicable)

- All Weights Legal                       Trip & Return within Effective Dates
- Construction Equipment (12' wide or less & All Weights Legal)
- Other Permit Type \_\_\_\_\_

**Duration of Permit:** Desired Effective Date: \_\_\_\_\_

- 5 days     90 Days     365 days     Other \_\_\_\_\_

ODOT Permit # (if available): OH \_\_\_\_\_

(An ODOT permit must be obtained if there will be travel on State controlled roadways in conjunction with movement on any roadway authorized by this permit.)

**A copy of this permit shall be in the possession of the driver at all times and shall be shown on demand to any law enforcement officer.**

#### Office Use Only:

- Overweight                       Overwidth
- Overheight                       Overlength
- Single Trip                       Police Escort
- Trip & Return
- Other Fee (See Note)
- Total Permit Fee = \$ \_\_\_\_\_

Note: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Use This Page  
For More Than 9 Axles

## *Regional Hauling Permit*

### **OVERWEIGHT / OVERSIZE VEHICLE PERMIT APPLICATION & PERMIT**

Applicant Name - Owing Company or Contractor	Application Date
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Load - Description (include make and model or serial number)
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Vehicles	Make	Plate No. and State	Empty Wt.	No. of Axles	Sizes	Length	Width	Height
Trailer #3					Trailer #3			
Trailer #4					Trailer #4			
Trailer #5					Trailer #5			
Load Weight		Total Gross Weight	Load + Empty Weights		Load			
	LBS.	=	LBS.	LBS.	Overall			

**COMPLETE IF OVERWEIGHT**

Axle Number	10	11	12	13	14	15	16	17	18
Axle Weight									
Number of Tires on Axle									
Tire Width									
Spacing Between Axles									

Additional Comments:

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**TERMS & CONDITIONS**

Pursuant to Section 4513.34 of the Ohio Revised Code, the below-named permittee is hereby authorized to move the vehicles, objects or structures identified herein that are in excess of the weight and/or size maximums specified in sections 5577.01 to 5577.09 of the Revised Code, or otherwise not in conformity with sections 4513.01 to 4513.37 of the Revised Code. Movement is authorized upon the specific streets, highways, bridges or culverts identified herein and the permittee shall be limited to those routes specified and no others. Authorization to traverse bridges/structures owned and/or maintained by entities other than the Riley Township Trustees must be obtained from the proper authorities (e.g. State owned roadways, County (Note: County may be responsible for some structures on Township roadways), City or Village roadways). It is the sole responsibility of the hauler/permittee to ensure that all movement can be made safely. Hauler/Permittee is responsible to notify rail companies prior to movement over any railroad crossing. Maximum permitted speed shall not exceed 45 MPH.

This permit may be suspended or revoked (in accordance with the O.R.C.) by the Township Trustee(s) or any law enforcement officer for good cause, including, but not limited to, any violation of the terms, conditions and limitations of this permit, violation of law, or any lapse or reduction of the required insurance coverages (required insurance shall be, at a minimum, equal to that which is required by ODOT's OS-32 form).

This permit shall take effect on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and shall expire on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ (or the date of expiration of the required insurance, whichever is earlier; or in the case of a single move, upon the completion of the move).

**This permit is subject to all Terms, Conditions and Limitations contained herein. All limitations/provision and special conditions required as part of an ODOT permit issued for the permitted vehicle/load specified in this permit shall be considered requirements of this permit.**

**Additional Notes / Terms & Conditions of this Permit:**

\_\_\_\_\_

**Name of Permittee/Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

*By signing below, I agree or agree on behalf of the permittee that I have read and accept all the Terms, Conditions, Limitations and Provisions of this permit, and I verify that the information being submitted is true and exact, without exception. Furthermore, the permittee agrees to pay the cost of repairing any and all damages caused to highways or structures by the movement of the permitted load and agrees to hold the Permitting Authority/the Township/Township Trustees, the Sandusky County Commissioners, the Sandusky County Engineer, the Local Authority with jurisdiction over said roadway, Integrity Permits LLC and/ or all other government entities associated with permitted move harmless from any and all liability. Acceptance of this permit shall be deemed acceptance of the Terms, Conditions, Limitations and Provisions specified herein.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(In lieu of signature, type name of duly authorized individual that is requesting permit on behalf of "Applicant" as listed above)

**"LIMITATIONS/PROVISIONS ON THE USE OF A REGIONAL HAULING PERMIT" Must accompany this permit**

Email completed "Application" to: **info@integritypermits.com** or

Fax completed "Application" to: **740-539-8819**

<b>Official Use Only</b>	
Issuance Date:	_____
Effective Date:	_____
Expiration Date:	_____
Permit No.:	_____
Permit Type:	_____

<b>Sandusky County Engineer</b>	
Reviewed/Authorized by:	
_____	_____
	Date

<b>Township Use Only</b>	
Void if blank, altered, or unsigned.	
Note:	_____
	Date