

ANNUAL OVERSIZE PERMIT

80,000 lbs. or less

(Valid For One Power Unit Only)

Send To <i>Henry County Engineer's Office</i>				Fax Number <i>319 385-0777</i>			
Address <i>P O Box 655, Mt. Pleasant, IA 52641</i>				Phone Number <i>319 385-0762</i>			
Email: <i>engineer@henrycountyiowa.us</i>							
<input checked="" type="checkbox"/> Annual Oversize \$ <u>50.00</u>				<input type="checkbox"/> Bridge Exempt \$ _____ <input type="checkbox"/> Weight Increase \$ _____ <input type="checkbox"/> All Systems \$ _____ <input type="checkbox"/> SME \$ _____			
Issued To							
Address				City/State/Zip			
Power Unit License No. & State		Power Unit Year & Make		Power Unit Registered Weight		Trailer License No. & State	Trailer Make
Object or Load			Serial No.			S.M.E. Plate No.	
Overall Length	Width	Height	Total Weight	Trailer Length		Load Length	Projections Front _____ Rear _____
Axle Weights	Single		Tandem		Triple		Quad
Axle Spacing							
<p>GENERAL REQUIREMENTS:</p> <p><input type="checkbox"/> Civilian front escort <input type="checkbox"/> With mounted height pole <input type="checkbox"/> Civilian rear escort <input type="checkbox"/> Amber revolving light/strobe light with 360° visibility</p> <p><input type="checkbox"/> Required on Highway _____ <input type="checkbox"/> Required entire route</p> <p><input type="checkbox"/> Law enforcement escort <input type="checkbox"/> Front <input type="checkbox"/> Rear</p> <p><input type="checkbox"/> See General Provisions for escort requirements for overwidth vehicles.</p> <p><input type="checkbox"/> SME plate must be displayed.</p> <p><input checked="" type="checkbox"/> Centerline all bridges; obey all bridge postings.</p> <p><input type="checkbox"/> Load must slow or stop when necessary to avoid approaching traffic when centering.</p> <p><input checked="" type="checkbox"/> Hazardous materials must be transported in compliance with applicable federal regulations.</p> <p><input type="checkbox"/> Run around clearance on route # _____ <input type="checkbox"/> Run marked detour on route # _____</p> <p><input type="checkbox"/> Round Trip. Return by reverse route with in same five days.</p> <p><input type="checkbox"/> Special Requirement _____</p>							
Requested By				Phone No.		Cell No.	
Fax No.		Email Address:					

OFFICE USE ONLY:	
Valid Dates _____ <input type="checkbox"/> ½ hour before sunrise to ½ hour after sunset <input type="checkbox"/> Continuous	
Issued by:	Date:

Disclosure Statement: The information furnished on this application will be used by the Henry County Secondary Road Department to prepare and issue permits. All information applicable to a given permit is required and is public information. Failure to complete the application as required will result in denial of permit. Permit issuing authorities will not be responsible for any damages that are the result of the move. The State of Iowa, the Department of Transportation, and any other permit issuing authority assume no responsibility for the property of the permit holder.