

ANNUAL TRIP PERMIT APPLICATION

Emmet County Engineers Office 609 1st Avenue North Suite 4 Estherville, IA 51334-2263

Phone: (712)362-4846 Fax: (712)362-0112

☐ Annual Oversize \$50											
☐ Oversize/Overweight \$400											
Cash or Check. We do not accept credit cards											
Permit Number:											
Date Issued:											

Email: afisher@emmetcountyia.gov									Date Issued:							
Section A	– Issu	ed to: F	Please p	orint clearl	y or type	9										
Legal Name – Vehicle Owner or Lessee									Requested Start Date (1/2 hour before sunrise to ½ hour after sunset)							
Address									Phone Number U.S. DOT Number							
City	Code		Fax Number				MC N	MC Number								
Email Addr		Carrier Type					Iowa Intrastate Authority Number									
							☐ For Hire ☐ Private									
Contact Na	me for D	OT to call i	f auestion	s / Area Code	– Telephon	e No.										
			. 40.000.00	,												
Section B	B – Pow	er Unit	& Traile	er Informa	tion. Po	wer Unit	t – Bo	th Plate/	'Stat	te and VIN	must be	identifi	ed.			
Plate			tate	Vehicle Ide			Registered Weight			Year		Make				
							, ,		5							
Tuoilan F	N-+- /C+	- 4		. +:f:!											-	
Trailer – F	Plate/St			1			1	011 /5		1						
Plate			tate	Make				Other (Provide details)								
Section D) – Dim	ensions	s/Weig	ht												
Length				Width			Height			Total Weight		Front Projection			rojection	
(max=120')			(max=16')			((max=1	15′5″)	_	(max=80,000 lbs)		(max=15')		(ma	ax=15')	
Total																
Section E	– Axe	l Weigh	ts/Spac	ing – front	to rear (required	whe	n gross w	eigh/	ht exceeds	80,000 II	os.)				
Section E – Axel Weights/Spacing – front to rear (red Axle Number 1 (front) 2 3								4		5	1		7		8	
Gross Axle Weight (lbs)																
Axle Spacin																
'	<u> </u>															
Section F	_ Dorr	nit Deli	verv (ch	ack one)			Δccen	stance of	Cor	nditions:	certify th	at the s	tatements co	ntained i	in the	
								ptance of Conditions: I certify that the statements contained in the cation are true and correct and I will comply with the General Provision								
								1-19.					,			
□ Fax							X									
							Customer or Authorized Agent							Date	е	
□ Email							Permit Issued By:									
	Please	allow 2	4 hours	for processi	ng.											
Canaral [Domini						Perm	nit Officer						Date	е	
General F	-					40										
		•		neral Provisio							"0		. " .			
•				more inforr	٠.			•		•	e "Genera	il Provisi	ions" and carı	y them w	ith your	
☐ Road mu	ust be cle	ear of ice	& snow 8	& visibility m	ust be at l	east ¼ mi	le.									
				itions are sof ain permissio									if road condit ed.	ions woul	ld be	
☐ Hazardo	us mate	rials must	t be trans	sported in co	mpliance	with appl	icable	federal re	egula	ations.						
□ Necessa	ry city aı	nd/or cou	inty perm	nits must be	obtained s	eparately	/ .									
☐ Centerlin	ne all bri	dges: Prir	mary at 5	mph.												
		_		ormal speed	or travel	in normal	l lane	on bridges	s at 5	5mph.						
☐ Special F	Requiren	nent:														