BARRON COUNTY SINGLE TRIP PERMIT APPLICATIONS

PERMISSION TO MOVE OVER WIDTH OR OVERWEIGHT ARTICLES ON COUNTY TRUNK HIGHWAY SYSTEM

PERMISSION IS HEREBY GRANTED TO (subject to the requirements and the provisions of the statutes of this state):

To move the following article	:				
Width of vehicle and load:					
Length of vehicle and load:					
Height of vehicle & load:					
Axle weight(s):	(1)	(2) (5)		(3) (6)	
Make of towing vehicle:					
License number:			St	ate:	
Insurance company name:					**attach proof of insurance
Policy number:			Expirat	ion:	

This article must be moved during the daylight hours and must be off the highway right-of-way by sundown. The corners of the article should be marked with red flags and where traffic cannot readily pass, there should be a flagman to the front and rear of the vehicle.

In consideration of the foregoing permit, the undersigned hereby agrees to indemnify and pay the County for any damage caused to County by the moving of the article hereinabove described and to indemnify and hold the County harmless from any damage, liability, claim or demand in any way raising out of the moving of said article.

TRIP INFORMATION					
Route Loaded Trip **attach highlighted map					
From (City, Village, Township, etc.) Via (Highway)	To (City, Village, Township, etc.)				
Return Trip					
From (City, Village, Township, etc.) Via (Highway)	To (City, Village, Township, etc.)				
	Descrit Evaluation Date				
Permit Effective Date Dated	Permit Expiration Date Dated				
Applicant's Signature	Approved Signature				
	Michael Hoefs, Highway Commissioner				
Printed Name, Title	Printed Name, Title				
	Barron County Highway Department				
Company Name (if applicable)	Unit of Government				