

**VAN BUREN COUNTY HIGHWAY DEPARTMENT
APPLICATION FOR ONE TRIP OVERSIZE PERMIT
(Valid For One Power Unit Only)**

Van Buren County Engineer
PO Box 494
Keosauqua, IA 52565

Application Date _____
Permit # _____
Permit Fee **\$10.00**
Make check payable to: **Van Buren County Engineer**

Issued To: _____						
Address: _____		City _____		State _____		Zip Code _____
Power Unit License No. & State _____		Power Unit Year & Make _____		Power Unit Registered Weight _____		Trailer License No. & State _____ Make _____
Object or Load _____		Serial No. _____		S.M.E. Plate No. _____		Tow-away ____ Self-propelled ____
Overall Length _____	Width _____	Height _____	Total Weight _____	Trailer Length _____	Load Length _____	Projections: Front <u>0</u> Rear <u>0</u>
Axle Spacing _____						
Trip From: _____				Trip To: _____		
Route on Van Buren County Secondary Roads _____						

General Requirements:

<input type="checkbox"/> Civilian front escort	<input type="checkbox"/> With mounted height pole	<input type="checkbox"/> Civilian rear escort	<input type="checkbox"/> Amber revolving lights/Strobe light w/360 visibility
<input type="checkbox"/> Required on Highway	<input type="checkbox"/> Required entire route	<input type="checkbox"/> Law enforcement escort	<input type="checkbox"/> Overdimensional signs and flags must be displayed
<input type="checkbox"/> See General Provisions for escort requirements for overwidth vehicles			<input type="checkbox"/> Utility crew required

Centerline all bridges.

Load must slow or stop when necessary to avoid approaching traffic when centerlining.

Hazardous materials must be transported in compliance with applicable federal regulations.

Run around clearance on route # _____ Run marked detour on route # _____

Speed Limit - Maximum posted limits unless otherwise specified on permit.

Must carry copy of permit and General Provisions dated 10/01 and comply with them.

Road must be clear of ice and snow and visibility must be at least 1/4 mile.

Necessary city and/or state permits must be obtained separately.

Round trip. Return by reverse route with in same five days.

Special Requirement _____

Valid Dates 8/18/2005	<input type="checkbox"/> 1/2 hr. before sunrise to 1/2 hr after sunset	<input type="checkbox"/> continuous
Requested by: _____	Phone No. _____	Issued by: _____

Disclosure Statement: The information furnished on this application will be used by Van Buren County 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 authority assume no responsibility for the property of the permit holder.

The permit holder is required to carry a copy of the Iowa General Provisions for Oversize Load Permit dated 10/2001 in addition to this document.