LYME TOWNSHIP

(HURON COUNTY OHIO) 5646 Young Road, Bellevue, OH 44811

Regional Hauling Permit **OVERWEIGHT / OVERSIZE VEHICLE PERMIT APPLICATION & PERMIT**

Applicant Name - Owr	ning Co	mnany or Co	•	S Vallu Ulliy W	nien signeu/is	Sued by Perm Application D		<i>y)</i>			
Applicant Nume Own	iiiig co	inputty of co	ittractor			пррисаціон В	utc				
Address Cor					Contact Perso	Contact Person					
City		State	Zip		Telephone Number						
FEIN		□ ICC-MC	No.		Fax Number or E-mail						
biograp from the LEE			□ DOT								
Load - Description (inc	lude m	nake and mod	del or serial n	umber)				□ Towed □ Loaded	□ Self- Propelled	□ Various Trailers	
Vehicles	Make		Plate No. and State		Empty Wt.	No. of Axles	Sizes	Length	Width	Heigh	
Power-Unit	ower-Unit						Power Unit				
Trailer #1							Trailer #1				
Trailer #2							Trailer #2				
Load Weight			Total Gr	oss Weight	Load + Em	pty Weights	Load				
LBS.			LBS	-	LBS.	Overall					
				СОМ	PLETE IF OVEI	RWEIGHT					
Axle Number		1	2	3	4	5	6	7	8	9	
Axle Weight											
Number of Tires on Ax	de										
Tire Width											
Spacing Between Axle	S										
				ROL	ITING INFORM	MATION					
From: (Intersection or A	ddress)				To: (Int	ersection or Add	lress)				
VIA Highways / Roads					I						
Township Comments:											
Township comments.											
Type of Permit R	Reque	ested: (Ch	eck All Ap	plicable)				Office Use	e Only:		
□ All Weights Legal								□ Overweight □ Overwidth			
□ Construction Equipment (12' wide or less & All Weights Legal)						□ Overheight □ Overlength			_		
Other Permit Type (Use "Type Permit" as listed on ODOT Permit)						☐ Single Trip ☐ Police Escort					
Duration of Permit: Desired Effective Date:							□ Trip & Return □ Other Fee (See Note)				
□ 5 days □ 90 Days □ 365 days □ Other							☐ Total Permit Fee = \$				
ODOT Permit # (if	avail	able): OH	e will be travel	on State controlls	ad roadways in co	niunction	Note:				
A copy of this	with n	novement on ar	roadway aut	horized by this pe	ermit.)	r at all					
times and shall								Pag			

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(HURON COUNTY OHIO)

Use This Page For More Than 9 Axles

Regional Hauling Permit

OVERWEIGHT / OVERSIZE VEHICLE PERMIT APPLICATION & PERMIT

Applicant Name - Owning Company or Contractor				Application Date						
Load - Descrip	otion (include r	make and mode	el or serial nu	mber)						
Vehicles	Make		Plate No. and State		Empty Wt.	No. of Axles	Sizes	Length	Width	Height
Trailer #3	railer #3						Trailer #3			
Trailer #4							Trailer #4			
Trailer #5							Trailer #5			
Load Weight			Total Gro	_		pty Weights	y Weights Load			
LBS.			LBS.			LBS.	Overall			
				СОМР	LETE IF OVE	RWEIGHT				
Axle Number 10		11	12	13	14	15	16	17	18	
Axle Weight										
Number of Tires on Axle										
Tire Width										
Spacing Betw	een Axles									
Additiona	l Commer	nts:								

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 Lyme Township Trustees must be obtained from the proper authorities (e.g. State owned roadways, County (Note: County is 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.

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 This permit shall take effect on the _____ day of _____, 20____, and shall expire on the _____ day of _____, 20____, and shall expire on the _____ day of _____, 20____, and shall expire on the _____ day of _____, 20____, and shall expire on the _____ day of _____, 20_____, and shall expire on the _____ day of _____, 20_____, and shall expire on the ______ day of ______, 20_____, and shall expire on the ______ day of ______, 20______, and shall expire on the ______ day of ______, 20______, and shall expire on the _______ day of _______, 20_______, and shall expire on the _______ day of _______, 20_______, and shall expire on the _______ day of ________, 20________, and shall expire on the __________ day of _________. 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 Huron County Commissioners, the Huron County Engineer, the Local Authority with jurisdiction over said roadway 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**

ALL Hauling Permit requests for Lyme Township roadways are processed by Integrity Permits, LLC Please contact Integrity Permits at 740-994-1844 or 740-994-1845 with any questions

Official Use Only	
Issuance Date:	
Effective Date:	
Expiration Date:	
Permit No.:	
Permit Type:	

	Huron County Engineer Reviewed/Authorized by:	
		Date
	Township Use Only Void if blank, altered, or unsign	ned.
Note:	-	Date

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