



APPLICATION FOR OVERSIZE / OVERWEIGHT VEHICLES

NOTIFICATION IS REQUIRED TWENTY-FOUR (24) HOURS IN ADVANCE OF INTENDED HAULING TIME.

COMPLETE APPLICATION & FAX TO: DEPT. OF PUBLIC WORKS, 717-845-1353

***THE PERMIT WILL BE VALID FOR FIVE (5) CALENDAR DAYS AFTER DATE OF ISSUANCE.**

Per City of York Codified Ordinance §513.08, section (c)4.

FEES: \$50.00 PERMIT FEE/MOVEMENT * PLUS: Fifty [\$.50] for each 1,000 pounds (or fraction thereof) over & above 80,000 pounds gross vehicle weight per movement - Per City of York Codified Ordinance §513.08, section (c)3. **Permit fee will be determined upon receipt of application.**

YORK CITY ESCORT REQUIREMENTS: ONE VEHICLE REQUIRED if over 11' in total width OR in excess of 75' in length. TWO VEHICLES REQUIRED if over in BOTH width (11') and length (75') - Per City of York Codified Ordinance §513.08, section (f)6.

ANY MOVEMENT ON STATE DESIGNATED ROUTES THAT LIE WITHIN THE CITY OF YORK, PA SHALL BE REGULATED BY A PERMIT ISSUED BY THE COMMONWEALTH OF PA - Per City of York Codified Ordinance §513.08, section (a).

State Permit # (if applicable): _____

***A copy of the APPROVED State Permit must be included with this application. Application WILL NOT BE PROCESSED without the State Permit.**

Proof of Liability Insurance (not less than one million dollars). – Expiration Date: _____

***Valid Certificate of Insurance naming City of York as insured must be included with application.**

Escort YES NO Special Provisions _____

***Please list type of escort (Pilot Car, State, Police etc. and total number of escort vehicles).**

Today's Date: _____ Time of Permit Request: _____

Name of Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Company Phone No.: _____ Fax No.: _____

*Approved Permit will be faxed to this number.

Contact Person: _____ Email: _____

Truck registration plate number: _____ Trailer registration plate number: _____

Date of Move: _____ Time of Move: _____

Permit Type: (Single Movement OR Multiple Movements): _____

Description of Load: _____

Size of Load:

Weight - _____ pounds - _____ tons [Must be over 80,000 pounds &/or]

Height - _____ feet _____ inches [Must be more than 13' 6"]

Width - _____ feet _____ inches [Must be more than 8' 6"]

Length - _____ feet _____ inches [Must be more than 75']

Trip Route – (Origin/Destination): _____