

Village of Itasca

540 W Irving Park Road, Itasca, IL 60143
 Phone: 630-773-1004 Fax 630-773-2734 www.itasca.com



Overweight/Oversize Vehicle Movement Permit

PERMIT MUST BE CARRIED IN VEHICLE DURING MOVEMENT HEREBY AUTHORIZED

PAYMENT DUE WITH IN 10 DAYS OF ISSUANCE.

Payment by check or log on to www.itasca.com for credit card payment. (MasterCard, Discover, AMEX, COMCHEK only)

Permit Number	Date Issued	Permit Valid From	To	Expires
---------------	-------------	----------------------	----	---------

Permittee (Owner or Lessee of Vehicle)	Telephone Number	Fax Number
--	------------------	------------

Address	Street	City	State	Zip
---------	--------	------	-------	-----

Name of person making application	Title	Account Number
-----------------------------------	-------	----------------

Type of permit requested Single Trip Round Trip Other	Method of Movement Loaded Towed Power	IDOT Permit Number
--	--	--------------------

Power Unit License Number	State	Expires	Number of Axles
---------------------------	-------	---------	-----------------

Vehicle and Load Description

--

Gross Weight Legal Overweight	Gross Weight Requested
---------------------------------------	------------------------

Axle Weights Requested (beginning with steer axle)
--

Vehicle Dimension Legal Oversize	Width	Length	Height
--	-------	--------	--------

Over Routes:

--

To: (final destination)	Village Streets Utilized
-------------------------	--------------------------

Overweight Class	Fee:	Oversize Class:	Fee:	Total Fees:
------------------	------	-----------------	------	-------------

Conditions

Revisions to this permit must be made through re-application/additional fees may be assessed

Permittee has agreed to abide by Village Ordinances related to movement of overweight and overdimension vehicles on Village streets including provisions regarding liability for damage to Village streets, bridges, and Village owned appurtenances thereto and holds the Village harmless of any acts of the driver or owner taken under this permit which results in injury or loss to persons or property resulting from such movement.

Signature of Applicant	Date	Signature Authorizing	Date
------------------------	------	-----------------------	------

INCIDENT NUMBER