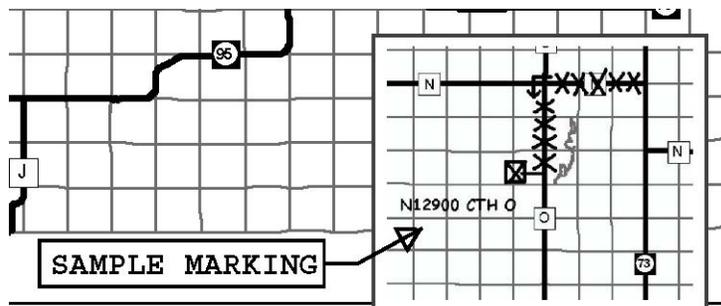


## **SEASONAL WEIGHT EXEMPTION PERMIT INSTRUCTIONS:**

This form is to be used by individuals who have material to be hauled that is either perishable or is not divisible, meaning that it is unable to be split into smaller, less heavy loads, which would enable the hauler to transport within the weight restricted limits. Any special circumstances would need to be discussed with the Highway Commissioner for potential approval.

1. This permit is to be filled out by the individual or company who will be transporting the materials, not the individual or company who will be receiving the materials. The signed and approved permit must be in the transporting vehicle to be valid. Any attempt to phone in to this office for verbal exemption is not permitted.
2. This permit is not valid unless signed by the Highway Commissioner.
3. Please fill this form out as thoroughly as possible. Leaving any information blank will result in the denial of your permit.
4. The map included with your permit is important to assist our office in making sure that the route is clear. Do not neglect to include a marked map with your application submission. The route should be marked as follows:



5. This permit is only valid for county trunk highways. Any weight restrictions on State, City, Village or Township roads are handle by each respective entity.

*This page does not need to be returned to our office when submitting your application.*

# CLARK COUNTY HIGHWAY DEPARTMENT SEASONAL WEIGHT EXEMPTION PERMIT

Randy J. Anderson, Highway Commissioner, 801 Clay Street, Neillsville, WI 54456

Telephone # (715) 743-3680 FAX # (715) 743-2219

# 2016

This Permit is Not Valid Unless Signed by the Highway Commissioner.

This Permit is **ONLY** Valid During Calendar Year 2016.

Permits may be revoked by Highway Commissioner at any time. Any operator cited for an overweight load on a County Highway will forfeit their permits for **all** County Highways for himself/herself and **all** other vehicles named on the permit.

ALL FIELDS ON THIS FORM ARE NECESSARY.

LEAVING INFORMATION BLANK WILL RESULT IN DENIAL OF PERMIT.

**\*\*PERMITS MUST BE WITH EXEMPTED UNIT TO BE VALID\*\***

COMPANY NAME: \_\_\_\_\_ REPRESENTATIVE'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ MOBILE PHONE: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Truck Description & License Number (LIST ALL TRUCKS YOU WISH TO EXEMPT):	Total Number of Axles:

Trailer Description & License Number (LIST ALL TRAILERS YOU WISH TO EXEMPT):	Total Number of Axles:

MULTIPLE TRIPS:	SINGLE TRIP: (PLEASE LIST DATE OF MOVE)
Number of Trips: _____ per: _____ DAY WEEK (SELECT ONE)	

TOTAL UNIT WEIGHT - NOT LOADED: (LIST EACH UNIT)	TOTAL UNIT WEIGHT - LOADED (LIST ALL UNITS)	TYPE OF MATERIAL BEING HAULED: (LIST ALL MATERIALS)

**TRUCK ROUTE APPLIED FOR:** (YOU MUST WRITE THE ROUTE DESCRIPTION BELOW, MARK THE MAP AS SHOWN, AND RETURN BOTH THIS APPLICATION FORM AND THE MARKED MAP TO OUR OFFICE.)

Signature of Company Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Commissioner: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Expiration: \_\_\_\_\_

**\*\*\* THIS PERMIT IS ONLY VALID FOR COUNTY HIGHWAYS \*\*\***

