

Mailing Address:  
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City of Vaughan Staff Use Only  
Date Received:  
Permit No.:  
Staff Initials:

## Transportation Services EXCESS LOAD PERMIT APPLICATION

### COMPANY INFORMATION (Please Print)

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_  
Email: \_\_\_\_\_

### AGENCY INFORMATION (Please Print)

Agency: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
  
City: \_\_\_\_\_ Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_  
Email: \_\_\_\_\_

### PERMIT INFORMATION (Please Print)

#### PERMIT REQUIRED

Dates Required: From: \_\_\_\_\_ To: \_\_\_\_\_  
Trip Type: Multiple  Single  Other   
Explain: \_\_\_\_\_

#### ROUTE INFORMATION

From: \_\_\_\_\_ Road: \_\_\_\_\_  
At: \_\_\_\_\_  
Roads Travelled: \_\_\_\_\_  
\_\_\_\_\_

To: \_\_\_\_\_ Road: \_\_\_\_\_  
At: \_\_\_\_\_

#### LOAD INFORMATION

Cargo Type: \_\_\_\_\_ Number of Loads: \_\_\_\_\_  
Size: \_\_\_\_\_ Height (m): \_\_\_\_\_ Length (m): \_\_\_\_\_  
Width (m): \_\_\_\_\_ Weight (kgs): \_\_\_\_\_

#### EXISTING PERMIT INFORMATION

(Attach a copy if applicable)

City of Vaughan

Building Permit No./Fill Permit: \_\_\_\_\_

York Region Permit (If Applicable)

Permit Title: \_\_\_\_\_ Permit No.: \_\_\_\_\_

**\*\*A Valid Certificate of Insurance is required with all applications\*\***

**\*\*\*A Load distribution diagram is required for all loads that do not meet HTA requirements\*\*\***

#### APPLICANTS AUTHORIZATION

Name: \_\_\_\_\_  
(Applicant or Responsible Officer-PLEASE PRINT)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Note: Load exemptions permit are at sole discretion of the City. All other necessary permits/approvals shall be obtained prior to any load exemption being granted. There is no exception to the half load restriction between March 1 to April 30.