

Permit #:  
Date:

## Elkhart County, Indiana Oversize/Overweight Vehicle Permit Application

Submit to:  
Elkhart County Highway  
610 Steury Ave,  
Goshen, IN 46526  
Fax: 574-533-7103

Fee: \$130  
Make Checks Payable to:  
Elkhart County Treasurer

permits@elkcohighwy.org



### Section A Company Information

|                 |                    |         |                       |
|-----------------|--------------------|---------|-----------------------|
| 1. Company Name | 2. Trip Start Date | 4. FEIN | 5. Business Telephone |
|                 | 3. Trip End Date   |         | 6. Fax Number         |

### Section B Vehicle Information

|                   |                    |                         |
|-------------------|--------------------|-------------------------|
| 1. VIN            | 2. Make of Tractor | 3. License Plate Number |
| 4. State Licensed | 5. Year of Tractor | 6. Load Serial Number   |

#### 7. Vehicle Description (check all that apply)

- |                                          |                                                   |                                              |
|------------------------------------------|---------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Tractor-Trailer | <input type="checkbox"/> Auto-Trailer             | <input type="checkbox"/> Fifth Wheel Hook-Up |
| <input type="checkbox"/> Truck           | <input type="checkbox"/> Self-Propelled Equipment | <input type="checkbox"/> Rear Steerable Axle |
| <input type="checkbox"/> Truck-Trailer   | <input type="checkbox"/> Other/Towed              | <input type="checkbox"/> Lead/Chase Vehicle  |

|                              |                    |           |             |    |    |    |    |
|------------------------------|--------------------|-----------|-------------|----|----|----|----|
| Vehicle Dimensions:          | 8. Overall Length: | 9. Width: | 10. Height: |    |    |    |    |
| 11. Total Gross Weight:      |                    |           |             |    |    |    |    |
| 12. Trailer and Load Length: |                    |           |             |    |    |    |    |
| 13. Loaded Axle Weights      | a:                 | b:        | c:          | d: | e: | f: | g: |
| 14. Axle Spacing             | a:                 | b:        | c:          | d: | e: | f: | g: |
| 15. Tires Per Axle           | a:                 | b:        | c:          | d: | e: | f: | g: |

### Section C Permit Information

|            |           |                |
|------------|-----------|----------------|
| 1. Mileage | 2. Origin | 3. Destination |
|------------|-----------|----------------|

|                                               |
|-----------------------------------------------|
| 4. Route To Be Traveled (or attach route map) |
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|                                           |
|-------------------------------------------|
| 5. Describe the load that you are moving. |
|-------------------------------------------|

### Section D Signature Information

This permit does not apply to any roads or bridges that are closed for construction purposes, or to any roads or bridges that are posted for gross load limits, and/or any roads, structures, wires, etc, having a restricted height and/or width clearance that will not clear said loads. A permit will not be approved if your load is divisible, either by method of loading or disassembly. The company owner or responsible officer will be responsible for any damage it causes to any roadway, drainage structure, or other public improvement located within Elkhart County Right-of-Way during the moving of said load. The company owner or responsible officer shall use all reasonable efforts to protect the public from any danger associated with the moving of the load, and shall be solely responsible for any such damage caused to the public. If the terms of this permit are not followed, the Board of Commissioners or their authorized representatives may cancel, rescind, or terminate any permits or authorization heretofore granted.

Approved:

County Representative \_\_\_\_\_ Date \_\_\_\_\_

Company Owner or Responsible Officer \_\_\_\_\_ Date \_\_\_\_\_  
Signature

Additional Requirements:

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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