



CITY OF NORCO

ONE DAY PERMIT

APPLICATION FOR MOVEMENT OF OVERSIZE LOADS ON CITY STREETS

2870 CLARK AVENUE, NORCO, CA 92860

(951) 270-5627

Transportation Permit No. _____

1) Applicant/Company Name: _____

2) Applicant Address: _____

3) Phone Number: _____ Fax Number: _____

The applicant hereby applies for one time permission to move a non-legal load consisting of:

4) Load Description: _____

5) Load Moving Date: _____ Time: _____

6) Load Height: _____ Width: _____ Length: _____

7) Gross Weight: _____ Number of Axles: _____ Wheel Loading Ratio: _____

8) Vehicle Year: _____ Vehicle Make: _____ License Plate: _____

9) Haul Route over City of Norco roads, beginning at: _____

10) Certificate of Insurance Filed: _____ Date of Expiration: _____

11) Name of Registered Owner of Vehicle: _____

12) Permit Expiration: _____ Permit Fee: _____

This permit is issued subject to the following conditions:

- ◆ Applicant agrees to the conditions set forth in Norco Municipal Code Chapter 10.18.
- ◆ Applicant certifies all hauling units are duly registered with the Department of Motor Vehicles as required by law.
- ◆ Applicant further agrees to preserve and save harmless the City of Norco, its officers, and employees, from any liability or responsibility for any accident, loss, or damage to persons or property happening or occurring as the proximate result of his activities pursuant to the permit applied for, including wrongful or accidental death.
- ◆ **APPLICANT SHALL GIVE TWENTY-FOUR (24) HOURS NOTICE WHEN REQUESTING PERMIT – FAX APPLICATION, INSURANCE INFORMATION AND A COPY OF THE CHECK THAT YOU WILL BE MAILING FOR \$17.00 TO: 951-270-5640.**

APPLICANT AGREES TO COMPLY WITH REGULATIONS LISTED ABOVE BY SIGNING THIS FORM.

Signature of Applicant: _____ Date: _____

AGENCY APPROVAL

City of Norco

Date