

email: PW-ROWpermits@ci.stpaul.mn.us

City of St. Paul

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Fax to: **651-266-9765**

Rev: 2020.1

Department of Public Works Right-of-Way Division

Reset Form

Application for OVERSIZE/OVER WEIGHT TRANSPORTATION Permit PART A - Vehicle & Load Information Permit No: _

	2. License/State 3. Stenciled 5. License/State 6. Licensed	
	5. Breenso State	
_	9. Weight of Load	
PART B - Weight & Dimensional Information (ALL Information is Required)		
10. Overhang: Front ft in Rear ft in	Mirrors may extend up to 6 inches on either side of the load Left	e Overhang: ft in ft in
	Show Axles (X) and Axle Spacing (Ft & In)	
1 2 3 12. 13. 13.	4 5 6 7 8 9 10 11 12 13 14 15	16 Spacing Axles
Overall Dimensions: 14. Width ft in 15. Height ft in 16. Length ft in 17. Total Axle Weight		
PART C - Complete & Sign (or Electronic Signature)		
18. Origin	19. Destination	
20. Route		
21. Date(s) of Move	22. Hours of Move	
23. Motor Vehicle Carrier 25. MnDOT or USDOT Numb	24. Owner of Load	
26. Permit Request Type: Sl	INGLE TRIP \$35.00 ANNUAL \$150.00 Receipt #	
27. I (we) certify that information submitted is correct. If granted this permit I (we) do hereby agree to comply with all regulations, limitations and conditions which apply to this movement and further state that I (we) have read the applicable law and statutes.		
	29. Date	
APPROVALS:		
33. Bridge Engineer - Approve	24. Date / Time:	
35 ROW Manager - Approved	1 (by) 36. Date / Time:	