

COTTONWOOD COUNTY MOVING PERMIT

Phone: 507-831-1389 Fax to: 507-831-2367

1. Object or Material to be moved _____ Length _____ ft. Width _____ ft.

2. Moving Dates: _____, 20__ to _____, 20__.

3. Does total weight exceed 9 ton per axle? (yes) (no)

4. Does total weight exceed 5 ton per axle? (yes) (no) (during road postings only)

5. Movement to be from _____

Via County HighwayNumbers _____

6. Is building to be located within Cottonwood County? (yes) (no)

And within limits of a city? (yes) (no)

PUBLIC LIABILITY - PROPERTY DAMAGE

Amount of public liability and property damage insurance carried: \$ _____

Company: _____

Name of local agency: _____ Telephone: _____

Address of agency: _____

(I) (We) request permission to move the above described vehicle(s) and load which exceed the legal limitation or are otherwise not in conformity with the Highway Traffic Regulation Act.

If granted this permit (I) (We) do hereby agree to comply with the provisions of the permit to take all necessary and reasonable precautions to maintain the safety of this movement and to be responsible for all liability for the personal injury of property damage which may occur in connection with this movement; and in the event any claim is made against the County of Cottonwood or Dept., office or employee thereof, though, by reason of or in connection with any such act or omission, applicant shall indemnify and hold them and each of them harmless from such claim. Further, (I) (We) do hereby agree to repair at (my) (our) own expense and to the satisfaction of the Cottonwood County Highway Engineer, any damage to the highways, structures, signs, or etc., which was caused as a result of this movement. The work of repair may be done by the Cottonwood County Highway Dept. and costs charged to and paid by the applicant.

(I) (We) also do hereby agree to comply with all regulations, provisions and limitations which apply to this movement if permission is granted.

Permission for this movement is hereby granted to the applicant listed below subject to compliance with provisions of the Minnesota Traffic Regulation Act and under the term, conditions and restrictions contained on the attached sheet and is subject to revocation upon noncompliance. **This permit must be carried on the towing vehicle at all times during the movement and is subject to inspection.**

NAME OF APPLICANT: _____ DATE: _____

ADDRESS: _____ Signature: _____

PHONE: _____ FAX: _____

AUTHORIZED BY: _____ DATE: _____

PILOT CAR REQUIRED YES _____ NO _____

