



Richmond Township Road District

Special Moving Permit Application

8712 Route 31
Richmond, IL 60071
815-678-4144

Company or Person: _____
Address: _____ State _____ ZIP _____
Phone: _____ Fax or Email _____

Type of equipment to be moved: _____

Reason for permit: (i.e. oversize, over weight) _____

Length: _____ Width: _____ Height: _____ Gross weight: _____

Number of axles: _____ license plate number: _____ State of issuance: _____

Address departing from: _____

Destination address: _____

Roads/route to be accessed: _____

Requested date of movement: ____/____/____ (permit is valid for 2 days midnight to midnight)

In accordance with 625 ILCS 5/15-301 of the Illinois Vehicle Code, the above-named applicant hereby request authorization from the Richmond Township Highway Commissioner to make the above indicated movement(s) that exceed(s) the maximum size or weight as specified in the Illinois Vehicle Code. The applicant hereby acknowledges that the movement(s) shall be subject to the various restrictions as the appear on this form.

This form must be faxed to 815.678.7654, emailed to richmondroaddistrict@gmail.com, or mailed to 7812 Route 31 Richmond IL 60071 for submission.

Permit is only valid for the indicated route and time of travel; any change of route, destination or dates requires a new application for movement. Permit must be in possession of the driver during movement.

An administrative permit fee of \$25.00 is hereby charged for each and every permit issued by the Richmond Township Road District – ORD #RD2010-1

Applicants signature: _____ Date: ____/____/____

For administrative use only do not write below this line

Date issued _____ Time Issued _____ Permit Number ____ - ____ Valid Dates _____ - _____

Issued by: _____ (permit is valid for 2 days 00:00 to 00:00 local)

Special instruction or restrictions: _____

Payment received: Date _____ Check # _____ Cash

THIS IS NOT A PERMIT

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