



**OVERWEIGHT PERMIT**

Name: \_\_\_\_\_

Permit #: \_\_\_\_\_

Address: \_\_\_\_\_

Date Issued: \_\_\_/\_\_\_/\_\_\_

City/ State/Zip: \_\_\_\_\_

Telephone #: \_\_\_\_\_

**Requested By:**

PUCO #: \_\_\_\_\_

ICC#: \_\_\_\_\_

FEIN/SSN: \_\_\_\_\_

US/DOT: \_\_\_\_\_

Vehicle Info:    Year/Make                      License#                      Empty Weight                      # of Axles

Power Unit:    \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Trailer:        \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Roads to be use: \_\_\_\_\_

Location load originated \_\_\_\_\_

Destination of load: \_\_\_\_\_

Effective Date: \_\_\_\_\_ Effective Until: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

Attach/remit with Permit Application the following:

- Proof of insurance for tractor/ trailer/all units
- State of Ohio Permit
- Cost is \$50.00 per unit, per month, checks made payable to the City of Brooklyn

\_\_\_\_\_  
Permit Issued By

The foregoing instrument was acknowledged before me on this \_\_\_\_\_ (date)  
by \_\_\_\_\_ (name of person acknowledging).

\_\_\_\_\_  
Signature of Notary Public – State of Ohio

My commission expires: \_\_\_\_\_

(Notary Seal)

**MOVING FORWARD. TOGETHER.**