



**CITY OF TOLEDO
ANNUAL TRANSPORTATION PERMIT
OVERSIZE LOAD**

Permit No: _____
Date: _____
Fee: \$8.00 per vehicle
Amt Paid _____

- From Oregon Highway-20 at the west junction (Exit-6) with access to Business Highway 20 to North Bay Road on to Georgia Pacific Gate-7.
- From Oregon Highway-20 at the west junction (Exit-6) with access to Business Highway 20 and on to A Street connecting to Butler Bridge Road. Stinger Steering is required for access on this route.

PLEASE READ CAREFULLY

Subject to all terms and conditions, and pursuant to the provisions of ORS 483.528, and not otherwise, the permittee is hereby authorized to move the commodity or vehicle or combination of vehicles and load of the description, overall size and weight hereinafter stated over City roadways named herein from:

Business: _____
 Address: _____

 Contact Person: _____
 Phone No.: _____
 Fax No.: _____ E-Mail: _____

Commodity:	Overall Width:	Overall Length:
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MAKE	YEAR	MOTOR NO.	P.U.C. NO.	LICENSE NO.	FIRM NO.

Operator is responsible for maintaining a single lane of travel at all times. Permittee shall also be held responsible and liable for any and all injury to persons or damage to property resulting from the movement over and upon city roadways, and shall indemnify and hold harmless the City of Toledo, its members, officers, employees, and agents, jointly and severally, from liability in the event that such injury or damage shall occur. In this connection permittee shall furnish to the City of Toledo evidence of satisfactory public liability and property damage insurance, in amounts as may be required by the City, and evidence of satisfactory indemnity insurance or a satisfactory indemnity bond, indemnifying the City of Toledo, its members, officers, employees, and agents, jointly and severally against liability in the event of an injury or accident occurring by reason of said permittee's operation on city roadways. This permit shall automatically terminate and be of no force and effect, in the event that any insurance or bond filed under this provision is allowed to lapse.

Insurance Carrier:	Amount:	Expiration Date:
Bond Company:	Amount:	Expiration Date:

A permit fee of \$8.00 annually is required for each oversized commercial vehicle operated on the authorized City route.

Number of Commercial Vehicles: _____ x \$8.00 = _____ Permit fee enclosed, payable to the City of Toledo

I agree to comply with the requirements of the Annual Transportation Permit.

_____ Dated: _____
Applicant's Signature

The applicant shall keep a copy of the approved permit in each vehicle(s) identified on the approved permit application.

THIS IS AN ANNUAL PERMIT THAT WILL EXPIRE AT THE END OF THE CALENDAR YEAR.

The City reserves the right to suspend or revoke this permit under City Ordinance 1327.

City of Toledo
Approved by: _____
Title: _____
Date: _____

Submit application and fee to:

City of Toledo City Hall PO Box 220 Toledo, OR 97391 (541) 336-2247 (541) 336-3512 (fax)

Question and information available at:

City of Toledo Police Department 250 W Highway 20 Toledo, OR 97391 (541) 336-5555 (541) 336-2123 (fax) www.cityoftoledo.org
