KITTITAS COUNTY
DEPARTMENT OF PUBLIC WORKS

OVER LEGAL LOAD APPLICATION

☐ **Over Legal (Each Permit): Per Code 10.16 = $_____** **Payment Method:** ☐ **Check** _____
☐ **Over Legal (Annual): Per Code 10.16 = $_____** ☐ **Cash** ☐ **Credit Card**
☐ **Over Legal (Super Load *): $750.00**

Owner Name _____ **Permit #**_____
Mailing Address _____
_____
Phone Number _____
Email Address_____

Moving Company_____
Mailing Address _____
_____
Phone Number _____
Email Address_____
Business License #_____

DATE STAMP

OVER LEGAL DESCRIPTION

Per RCW 46.44.091, application shall be submitted at least thirty-six hours in advance of the proposed movement. Super Load applications shall be submitted at least 30 days in advance of the proposed movement.

Date of Proposed Travel: Beginning Date: _____ Ending Date: _____

Load description: _____

Proposed Route: _____
_____
_____

Load Configuration: Maximum Width: _____ Maximum Height: _____ Maximum Length: _____

Gross Weight: _____ Excess Gross Weight: _____

Vehicle Information: Power Unit License No.: _____ No. of Axles: _____
Trailing Unit/Units License No.: _____ No. of Axles: _____

True Axle Weight:

Axle 1	Axle2	Axle3	Axle 4	Axle 5	Axle 6	Axle 7	Axle 8	Axle 9	Axle 10

* OVER LEGAL SUPER LOAD – ADDITIONAL REQUIREMENTS

Super Load Definition: A rolling load that is more than 200,000 pounds legal gross weight and 16' height or width, or over 125' non-divisible load (per WSDOT) is defined as a Super Load. This type of permit has more requirements for the safety issues and the preservation of existing infrastructure of county roads, bridges, and culvert crossings than an overweight permit. With each application all necessary attachments along with payment in full will be required in order to start the application process. Once all documentation is submitted the application will be reviewed and a decision will be made within 30 days per RCW 46.44.091.

The Following Items must be attached to this application packet for Super Loads:

- ☐ Route Plan showing limits of proposed haul route
- ☐ Traffic Control Plan
- ☐ Liability Insurance Accord

I, the undersigned applicant and permittee, certify that the information shown herewith is given by me and is true and correct. I also agree to follow all the requirements and conditions of this permit and that this permit is subject to cancellation without refund if violated by myself or authorized employee.

APPLICANTS SIGNATURE: _____ DATE: _____

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