

## OVERPOSTED WEIGHT HAULING PERMIT APPLICATION

**Center Township, Beaver County** 

AP	PLICATION NO	DATE REC	DATE RECEIVED	
1.	APPLICANT:			
2.	NAME / ADDRESS OF USER:	OR OTH	NAME / ADDRESS OF CONTRACTOR OR OTHER	
3.	TELEPHONE NO.:		NE NO.:	
4.	Application is made for authorization to exceed the posted gross weight restrictions on portions of Township roadways listed below:			
	STREET / ROAD	FROM / TO	<u>DURATION</u>	
5.	Nature of activity for which the Over-Posted Weight Hauling Permit is requested:			
6.				
7. Vehicle(s) and /or Equipment to be operated / moved under this Permit is as follows:		s as follows:		



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## READ, UNDERSTAND AND COMPLY WITH THE FOLLOWING NOTICES

NOTICE: If such public road or street is under the jurisdiction of the Commonwealth of Pennsylvania, you must obtain a Highway Occupancy Permit pursuant to Act. No. 428 of 1945, as amended known as the "State Highway Law." Application for such Highway Occupancy Permit as to a Commonwealth road or street must be made to, with and processed by the Pennsylvania Department of Transportation. If such road or street is under the jurisdiction of Center Township, you must apply for, and obtain an Excess Maintenance Agreement and / or a Driveway Permit from the Township.

## STATEMENTS AND VERIFICATION BY APPLICANT

I do hereby agree to observe and adhere to any and all provisions of the Center Township Code, and do further agree and understand that my failure to do so shall constitute a violation as to any Permit issued per this application, which violation shall cause any permit to become null and void, and revocable by Center Township.

I / We hereby certify that as applicants, owners, contractors, agents or others that I / we completed and read the foregoing Application and that the information and statements in this application and other representations contained in this application are true and correct to the best of our knowledge and belief. This statement and verification are made subject to the penalties of 18 PA.C.S.A. Section 4904 relating to unsworn falsification to authorities, which provides that if I / we knowingly make false statements or averments, I / we may be subject to criminal penalties. I / We hereby authorize representatives of the Township to make the required inspections upon the property to verify that the activity requested under this application complies with the Center Township Code or other applicable codes.

If applicant is Contractor or Agent of Owner, he / she hereby certifies that he / she has the authority to act on behalf of the Owner.

OWNER(S):	DATE
CONTRACTOR OR AGENT	
FEE IN THE AMOUNT OF \$	SUBMITTED HEREWITH.
	APPROVED:Center Township
	DATE: