

**APPLICATION FOR PERMIT  
TO TRANSPORT OVERSIZE OR OVERWEIGHT VEHICLES AND OBJECTS OVER  
COUNTY HIGHWAYS IN MASON COUNTY, ILLINOIS**

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

Date of Movement: \_\_\_\_\_

PLEASE ISSUE A PERMIT TO:	
Moving Company or Owner	Phone Number
Address	Fax Number
City, State & Zip Code	

ROUTE OF TRAVEL (ORIGIN & DESTINATION) Detail plan of movement on Mason Co. Highways
Attach Map with Location Indicated

DESCRIPTION OF VEHICLES AND LOAD Object or Load to be Moved:
Name of Equipment - Make or Model No., Etc.
Weight in Lbs.
Method of Moving (Truck, trailer, semi-trailer or on own power)
Number of Axles

OVERALL DIMENSIONS (INCLUDING LOAD & VEHICLE)
Width (Ft. & Inches)
Length (Ft. & Inches)
Height (Ft. & Inches)

I, the undersigned, do hereby solemnly swear that I have read the foregoing permit, and that I have read and agree to abide by the GENERAL PROVISIONS set forth in this document.

(Signature Required)

Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_

By: \_\_\_\_\_  
Its: \_\_\_\_\_

**The Remainder for Office Use Only  
PERMIT FOR OPERATION OF OVERSIZE AND/OR OVERWEIGHT VEHICLES AND OBJECTS  
OVER HIGHWAYS UNDER DIRECT JURISDICTION OF THE MASON COUNTY HIGHWAY DEPARTMENT**

Permit Issued to:
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Route:
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Object/Load to be Moved: Weight: By:
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**PERMIT ISSUED BY:**  
**MASON COUNTY HIGHWAY DEPARTMENT**  
1164 E LAUREL AVE.  
HAVANA, IL 62644  
(309) 543-3253 PHONE --- (309) 543-2034 FAX  
[masonchd@casscomm.com](mailto:masonchd@casscomm.com)

This permit covers only the specific movement mentioned above and is not transferable. It shall be carried on the vehicle to which it refers and shall be open to inspection by any police officer or authorized agent of Mason County Highway Department.

Permit not valid unless signed by County Engineer or his authorized agent.

Signature of County Engineer \_\_\_\_\_ Date \_\_\_\_\_