

## OVERSIZED VEHICLE/SUPERLOAD STREET MOVE APPLICATION

City of Cleveland Division of Assessments & Licenses 601 Lakeside Avenue, Room 122 Cleveland, Ohio 44114

Phone: (216) 664-2174 Hours of Operation:
8:00 a.m. to 4:30 p.m. Weekdays

dalpermits@clevelandohio.gov

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					STREET MOVE PERMIT						VALIDA	TED ST	REET	r Move P	ERMIT
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				-	ince Da						Issuance 1				
											Permit Issue				
		Permi	Permit Issued By						ı ermit issu	ьси БУ					
APP	PLICANT IN	NFORM.	ATION												
Appl	lication Dat	e			Desired Effective Date										
Own	er or Lesse	e of Veh	nicle										_		
Person Requesting					Permit Service										
Pern					Company										
Address							Name of Driver								
City, ST, Zip					Fein (Fed ID#)										
Telephone					Fax#										
Email						ICC-MC# DOT#									
Loa	D INFORM	IATION													
Loa	d – Descrij	ption (l	nclude mak	e and model o	r serial	numbe	r		Т	Towed	1			Self-prope	elled
					Log					Loade					
					15.		\ <del></del>	NT -		Loaue	Size	Tar	ngth	Width	Height
Ve	ehicles	N	Make	License No. ST		Emp Wt			o. of cles	Loa		Lei	ugtn	with	mergint
Powe	Power Unit					771		111	-25		ver Unit	_			
Trailer										Trai	iler				
Other Trailer										Fron	nt Overhan				
Load Weight				Gross Weigh	t				Rea	Rear Overhang					
						1 .			Ove	erall					
, -	NT 1			~	Complete if Overweight										
	Number	1.c	1	2	3	3 4		5			6	7		8	9
No. Tires Per Axle Tires or Rim Size													$\overline{}$		
Axle Weights					1							<del></del>	_		
Spacing Between Axles					+							<del> </del>	$\dashv$		
	JTING INFO														
	n (Location,						То	(Loca	tion, l	Muni,	, State)				
Via l	highway/roa	ads													
Түр	E OF PERI	міт Re	QUESTED –	- Снеск вох тн	IAT APPI	LIES									
	Variable tra	ailers, see	e attached list	·				T	F	Return	ı Trip				
寸	Active		72 Hours		f over 12	20,000 lb	os.								

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Construction equipment (up to 12' wide)

365 Days

Inactive (requires validation for each load)

90 Days

Continuing



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THE TRAILERS LISTED ON THIS FORM WILL BE USED WITH TRUCK OR TRACTOR LISTED ON PAGE 1 OF THIS FORM.

## **DESCRIPTION OF TRAILERS** WEIGHT ST of MAKE & MODEL Unit# LICENSE NUMBER VEHICLE ID # EMPTY IN REG. LBS.

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