

**BOARD OF SUPERVISORS**

West Vincent Township  
 729 Saint Matthews Road  
 Chester Springs, PA 19425-3301  
 (610) 458-1601  
 FAX (610) 458-1603  
 www.westvincentwp.org

KENNETH MILLER, JR., Chairman  
 ZOE PERKINS, Vice-Chairman  
 M. CLARE QUINN

JAMES R. WENDELGASS  
 TOWNSHIP MANAGER

**APPLICATION/PERMIT TO EXCEED POSTED WEIGHT OR SIZE LIMIT**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

This Application is to exceed (check one or both)  Weight Limit  Size Restriction on a  
 (Check one)  Highway  Bridge

The posted restriction is \_\_\_\_\_ and is located at or between \_\_\_\_\_

This Application is for \_\_\_\_\_ trips Beginning \_\_\_\_\_  
 (Number)

Gross Weight \_\_\_\_\_  
 Registered Gross Weight \_\_\_\_\_  
 Total Length \_\_\_\_\_  
 Total Width \_\_\_\_\_  
 Total Height \_\_\_\_\_

Type of Load \_\_\_\_\_  
 Equipment/Axles \_\_\_\_\_  
 Truck License/St \_\_\_\_\_  
 Trailer License/St \_\_\_\_\_

Axis Number	Axis weight Vehicle Only	Total Axis Weight Vehicle and Load	Manufacturer's Rated Axis Capacity	Distance from Previous Axis	With of Axis (Center to Outside Wheel)	Number of Wheels	Tire Size	Vehicle Registration Number

Insurance Co.	Policy Number	Effective Period	Liability Coverage	Property Damage

I, the undersigned hereby certify that the data submitted is correct to the best of my knowledge and belief

Signature \_\_\_\_\_

Date \_\_\_\_\_

Issuance Date: \_\_\_\_\_

Township Engineer: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Township Manager: \_\_\_\_\_