

ALLEGANY COUNTY DEPARTMENT OF  
PUBLIC WORKS

7 Court Street, Room 210

Belmont, NY 14813

Telephone: 585-268-9230 Fax: 585-268-9648

**SPECIAL HAULING PERMIT**

**THIS PERMIT MUST BE CARRIED ON VEHICLE AT ALL TIMES**

APPLICATION FOR SPECIAL HAULING PERMIT to move over County Highways a vehicle or combination of vehicles exceeding the dimensions and weight as specified in Section 385 of the Vehicle and Traffic Law.

Application is hereby made by the undersigned, \_\_\_\_\_ whose principal place of business is at \_\_\_\_\_ to transport over County Highways and following described vehicles and loads: (List Vehicle Description, G.V.W., License Plate No., and Load Description)

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The movement to be made over routes described in permit and it is requested that such movement originate and terminate as follows:

(1) From _____	To _____	Routes _____
(2) From _____	To _____	Routes _____
(3) From _____	To _____	Routes _____

Desired dates of travel: \_\_\_\_\_. This permit does not allow the crossing of a posted bridge with overweight vehicle. A New York State Special Hauling or Divisible Load Permit must be submitted with application for this permit. All vehicles must comply with restrictions on New York State Permits when traveling on County Roads. All permits shall expire upon completion of the permitted use as described herein.

It is understood that no movements will be made on Saturdays, Sundays or Holidays, unless approved by the Superintendent of Public Works, and that all movements will be limited to 7:00 a.m. to 4:30 p.m., when weather and road conditions are favorable. It is further agreed that any and all movements will be made in the manner provided by law, and in accordance with the conditions and regulations as hereinafter set forth, all forming a part hereof in which the applicant agrees in the acceptance of this permit to assume all responsibility and liability for damages to persons and/or property that may accrue during such movements through the negligence himself, his agents or employees, or from any other cause and have the County of Allegany harmless therefrom. Certificate of liability insurance is required on this permit, which expires on

\_\_\_\_\_.

By: \_\_\_\_\_ Approved by: \_\_\_\_\_  
Applicant Superintendent of Public Works