## KENDALL COUNTY HIGHWAY DEPARTMENT

## **Overweight - Overdimension Permit**

PERMITTEE (Owner or Le	essee of Vehicle)	PHONE	1	
PERMITTEE (Owner or Lessee of Vehicle)		FHONE	PHONE	
BILLING ADDRESS		FAX	FAX	
			SINGLE TRIP (Within 7 Days) ROUND TRIP (Within 14 Days)	
			VERDIMENSION ONLY	
		AG. EXEM	PT FOR HOMESTEADS	
DESCRIPTION OF OBJECT OR VEHICLE TO BE MOVED		VED LICENSE NO. OI	LICENSE NO. OF VEHICLE	
DESCRIPTION OF OBJECT OR VEHICLE TO BE MOVED		LICENSE NO. OF	VEHICLE	
NO. OF AXLES	S AXLE WEIGHT (Beginning With Steer Axle)			
GROSS WEIGHT (Lbs.)	WIDTH (Ft.)	LENGTH (Ft.)	HEIGHT (Ft.)	
ROUTE REQUESTED (Starting Point to Ending Point)				
ROUTE REQUESTED (Starting Fount to Ending Fount)				
-				
	Submit by Fax	x or E-Mail to:		
KENDALL COUNTY HIGHWAY DEPARTMENT				
6780 ROUTE 47				
YORKVILLE, IL 60560				
Phone: (630) 553-7616 Fax: (630) 553-9583				
mriley@co.kendall.il.us				
For Department Use Only				
PERMIT NO.	EFFECTIVE DATE	EXPIRATION DATE	PERMIT FEE	
			tion by Law Enforcement	
0 1	partment Officials. If you	-		
must contact the Highway Department and have the permit corrected prior to hauling vehicles or equipment on Kendall County Highways. See General Provisions on reverse side.				
equipment on Kendall Co	ounty Highways. See Gene	erai Provisions on reverse s	side.	
	APPROVED:		Kendall County Engineer	

TruckPermit (Rev. 07-17-15)

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