



Permit No. _____

SEDGWICK COUNTY, KANSAS NON-HOUSE MOVING PERMIT

Permit for moving Oversize / Overweight Loads
on Roads under the Jurisdiction of Sedgwick County, Kansas

- One Time
- 60 Day
- Annual

Date of Issuance: _____ Expected Date and Time of Move: _____

Owner of Record:	Moving Company:	Insurance Co & Policy No.
Company Name:		
Contact:		
Address:		
City, State & Zip		
Phone/Fax:		

This permit is valid for _____ days from date of issuance. This permit allows moving of said Load on said Route in accordance with K.S.A. 17-1914 and the Code of Sedgwick County, KS. This permit shall contain a formal load description (below), an attached map of the route, insurance and bond verification, any required traffic control plan, and the signature of the Sedgwick County Engineer.

Description of Load

Gross Weight _____ lbs No. of Axles: Tractor _____ Trailer _____

Axle Weights _____ lbs _____ lbs _____ lbs _____ lbs _____ lbs

Axle Spacing _____ ft _____ ft _____ ft _____ ft

Total Length front axle to back axle: _____ ft

Oversize / Overheight: Load Size _____ ft _____ ft _____ ft

Overall Size _____ ft _____ ft _____ ft

Height Width Length

(28' width max)

Description of Route:

Permit Fee \$ **WAIVED** **N/A** Paid Building Permit In Sedgwick County N/A

Utility Notification Less than 16' (N/A)

Utility Notice copies rec'd.

Signatures: (This permit must have a signature to be valid.)

Reviewed by: _____ Date: _____

Bridge Engineer _____

Traffic Engineer _____

Construction Engineer _____

County Engineer