



Mailing Address:  
37 Main St. E., Huntsville, ON P1H 1A1  
(705) 789-5684 Ext. 3821

# Overload/Moving Permit Requirements

## **REQUIREMENTS FOR OBTAINING AN OVERLOAD/MOVING PERMIT**

### For Buildings on Local Roads in the Town of Huntsville

The applicant must assume responsibility for all physical damage done to the road through its operations of moving of a building. Any repairs that are required must be completed to the sole satisfaction of the Director of Public Works.

The applicant must be responsible for obtaining approval in writing from any utility which might require relocation or movement such as Hydro One, Bell Canada or Cable TV, and additionally, must assume all responsibility for physical damage to the utility performed through its operation.

The applicant must additionally be responsible for all brushing or tree cutting required and if the trees that need to be cut are on the right-of-way, must obtain approval from the Director of Physical Services. Additionally, if the trees that require cutting are on private property, he must obtain approval from the property owners in writing. Further, it is the applicant's responsibility to determine whether the required cutting is on private property or municipal right-of-way.

The applicant must obtain an insurance policy in the amount of \$1,000,000.00 completely indemnifying the municipality for all damages caused through their operations.

The applicant must pay a permit fee of \$55.00 + G.S.T.

**The applicant must notify the Ontario Provincial Police prior to any move.**



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# Overload/Moving Permit

**Fee: \$55.00 + G.S.T.**

Mover: \_\_\_\_\_ Telephone No: \_\_\_\_\_

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

\_\_\_\_\_

Insurance Co: \_\_\_\_\_

Policy No: \_\_\_\_\_ Liability (P.L. & P.D.) Minimum \$1,000,000.00

Date of Move: \_\_\_\_\_ Hours: \_\_\_\_\_ Distance: \_\_\_\_\_

Routing: \_\_\_\_\_

\_\_\_\_\_

Item being Moved: \_\_\_\_\_ Size (loaded): L W H

Utilities Affected: Bell \_\_\_\_\_

Hydro One \_\_\_\_\_

Others \_\_\_\_\_

Railroad Affected (if any): \_\_\_\_\_ Notified: \_\_\_\_\_ Verified: \_\_\_\_\_

**ESCORT & PROTECTION:**

O.P.P. must be notified. Escort: YES NO

Flagman (specify): \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**OFFICE USE ONLY:**

Date Application Received: \_\_\_\_\_ Fee Received: \_\_\_\_\_

Permit Issued: YES NO Date: \_\_\_\_\_

Approved by: \_\_\_\_\_  
Superintendent or Foreman