



City of Danville  
Department of Community Development

**OVERWEIGHT AND OVER WIDTH LOADS APPLICATION**  
**TO TRAVEL ON DESIGNATED ROUTES IN THE CITY OF DANVILLE, ILLINOIS**

PERMISSION IS HERBY GRANTED TO:

COMPANY NAME: \_\_\_\_\_

CONTACT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

FOR THE MOVEMENT OF:

LOAD INFO: \_\_\_\_\_

ROUTE TO BE TAKEN: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIZE: \_\_\_\_\_ DATE: \_\_\_\_\_

The Permittee shall be responsible for any and all damages that may occur during this move, to any objects along the route, such as overhead wires, poles, signs, street inlet castings, traffic signal standards, etc.

The Permittee shall have property damage and public liability insurance in effect to meet any and all State of Illinois requirements, to be in effect during the life of this permit.

Return to: Fax Number (217) 431-3444 or email at [permits@cityofdanville.org](mailto:permits@cityofdanville.org)

I hereby accept these conditions with reservations.

SIGNED \_\_\_\_\_

Person, Firm or Corporation to Whom The Permit is Issued

-----*TO BE COMPLETED BY CITY STAFF*-----

Approved by: \_\_\_\_\_ Issue Date: \_\_\_\_\_

*This permit shall be void after seven (7) days from date of issue.*