



# CITY OF CAMPBELL RIVER

301 St. Ann's Road, Campbell River, B.C. V9W 4C7  
Telephone: 250.286.5700; Fax: 250.286.5761

## OVERSIZE VEHICLE PERMIT APPLICATION

Bylaw #3043

**FEE: \$50 per occasion or \$100 per year**

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**I hereby apply for permission to:**

Purpose: Transport oversized loads  Over 2.6 metres in width

Origin:  Over length (maximum varies based on vehicle type – see Traffic and Highways Regulation Bylaw)

Destination:  Over 4.2 metres in height

Vehicle Description: \_\_\_\_\_ Licence #: \_\_\_\_\_

\_\_\_\_\_  
Date of Application Applicant (print name) Signature

**City of Campbell River will notify the following:**

	RCMP	Fire Dept	Ambulance	Transit	City Of CR	MoTI
Approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Applicant to provide the following:**

Good Neighbour Letter	<input type="checkbox"/>	Provided	<input type="checkbox"/>	Not Required	99.7 The River	<input type="checkbox"/>	BC Hydro	<input type="checkbox"/>
Certificate of Insurance	<input type="checkbox"/>	Provided	<input type="checkbox"/>	On File	97.3 Eagle	<input type="checkbox"/>	Telus	<input type="checkbox"/>
Traffic Management Plan	<input type="checkbox"/>	Provided	<input type="checkbox"/>	Not Required	Campbell River Mirror	<input type="checkbox"/>	FortisBC	<input type="checkbox"/>
							Shaw	<input type="checkbox"/>

**Applicant to notify:**

**City to notify:**

**Subject to the following conditions, this Oversize Vehicle Permit is approved.**

**SEE ATTACHED PERMIT.**

\_\_\_\_\_  
Permit # Date: \_\_\_\_\_ Transportation Manager