

**OGEMAW COUNTY ROAD COMMISSION  
SEASONAL TRUCK PERMIT FOR MOVEMENT OF MILK AT LEGAL  
WEIGHTS ON COUNTY ROADS DURING SEASONAL WEIGHT RESTRICTIONS**

*In compliance with MCLA §257.722, the following information is required to be submitted in writing by the milk hauler requesting to transport legal weight loads on a county road during seasonal weight restrictions.*

As owner, I (we) hereby request permission to transport milk with the following vehicle or vehicle combination on the roads under the jurisdiction of the Road Commission and attest that the vehicle or vehicle combination does not exceed the legal maximum axle and wheel loadings within the county.

FOR ROAD COMMISSION USE ONLY	
Permit No.	
Date Issued	
Year Valid	

COMPANY NAME			
ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.	CONTACT PERSON		
SIGNATURE			
ROUTE REQUESTED			
POINT OF ORIGIN	DESTINATION (ADDRESSES OF STOPS)		
VEHICLE IDENTIFICATION NO. (VIN)	MAKE AND MODEL	LICENSE NO.	
FREQUENCY OF TRIPS	DESIRED TIME OF DAY		

APPROVAL BY THE ROAD COMMISSION FOR THE REQUESTED ROUTE ON THIS APPLICATION CONSTITUTES A PERMIT IN COMPLIANCE WITH MCLA §257.722 UNDER THE FOLLOWING CONDITIONS AND RESTRICTIONS:

- Permits are automatically invalidated by the violation of any of the conditions specified by the terms of the permit or by false information given on the application. Failure to comply with the conditions of this permit shall be just cause for the immediate suspension or revocation of any or all permits and the operator and/or owner of the vehicle subject to appropriate legal action.
- The vehicle covered by this permit shall not exceed 35 M.P.H. at any time.
- The movement shall not impede other traffic in an unreasonable manner and at no time shall traffic be blocked from use of the highway. Vehicles and loads shall not be parked on the highway at any time.
- The driver of the vehicle shall carry an approved copy of the permit in the vehicle to which it applies and shall have it available for inspection by any police officer, Motor Carrier Officer or duly authorized Road Commission employee.
- Applicant shall be responsible for any damage caused to wires, mailboxes, trees, buildings, or the road, including the structures and appurtenances, and shall reimburse the appropriate parties for any damage caused by the moving of said vehicle or load. Applicant shall save harmless, indemnify, defend, and represent the Board of County Road Commissioners against any and all claims for bodily injury or property damage, or any other claim arising out of or related to the moving of said vehicle, load, or its presence on or use of the highway by said vehicle and load.
- The Applicant shall furnish proof of general liability insurance in amounts not less than \$1,000,000 each occurrence and general aggregate, proof of automobile liability in amounts not less than \$1,000,000 combined single limit for each accident, bodily injury per accident, and property damage per accident, and in an amount not less than \$500,000 for bodily injury per person. Applicant shall cause the Road Commission to be an additional insured party on the policy. Such insurance shall cover a period not less than the term of the permit and shall provide that it cannot be cancelled without 30 days advance written notice to the Road Commission, by certified mail, first-class, return receipt requested. Permits are not valid if insurance expires. Insurance coverage shall remain in full force and effect while operating on the public highways under special permit.
- Applicant shall name the Road Commission as additional insured and certificate holder, by name, on any general comprehensive liability insurance or commercial general liability insurance carried by the applicant worded as follows: "The Board of (Name) County Road Commissioners, the (Name) County Road Commission, and their officers, agents and employees, are named as additional insured parties."
- The Road Commission has the right to suspend this permit if weather or road conditions warrant such action.

Recommended For Issuance By:

Approved By:

\_\_\_\_\_  
Title: County Foreman Date: \_\_\_\_\_

\_\_\_\_\_  
Title: Manager Date: \_\_\_\_\_