



APPLICATION FOR ABNORMAL LOAD PERMIT TO AUTHORISE THE USE OF VEHICLE(S) ON PUBLIC ROADS MAINTAINED BY MAYO COUNTY COUNCIL

Details of Proposed Route in Co. Mayo

Date(s) & Times(s) of proposed Journey

Single Journey/Daily €60 Quarterly Permit €150 Annual Permit €500 [please tick]

Description of Load

DIMENSIONS

Overall Weight of Vehicle & Load (tonnes)	
Overall Length (m)	
Overall Width (m)	
Maximum Height (m)	

PARTICULARS	VEHICLE	TRAILER
Registration Number		
Description		
No. of Axles		
Weight Axle No. 1 (Front Axle)		
Weight Axle No. 2		
Weight Axle No. 3		
Weight Axle No. 4		
Weight Axle No. 5		
Weight Axle No. 6		
Distance between centres of Axle 1 & 2		
Distance between centres of Axle 2 & 3		
Distance between centres of Axle 3 & 4		
Distance between centres of Axle 4 & 5		
Distance between centres of Axle 5 & 6		
No. of Wheels on Axle No. 1		
No. of Wheels on Axle No. 2		
No. of Wheels on Axle No. 3		
No. of Wheels on Axle No. 4		
No. of Wheels on Axle No. 5		
No. of Wheels on Axle No. 6		

I/We wish to apply for a permit to use the above vehicle(s) on the date(s) set out, on the public roads maintained by Mayo County Council. I/We undertake to refund to Mayo County Council the amount of any damage caused to any Public Road by the use of the vehicle or trailer under the Permit, which may be granted as a result of this application.

NAME OF COMPANY

ADDRESS

SIGNED

TEL. NO.

DATE:

FAX NO

NOTE: Applicants are required to give 4 working days notice of this application to the Commissioner of An Garda Síochána accompanied by a copy of appl.

Return completed Appl. form by **Post** to: Roads Office, Mayo County Council, Aras an Chontae, Castlebar, Co. Mayo. [Fee or eReceipt number must be included with completed Application Form]

Return completed form by **Email eload@mavococo.ie**
Payment to be made online @ www.mavococo.ie/en/Services/Roads/
Or by phone to Accounts Receivable 094-9064169, **Please be aware that on receipt of a completed application form it can take up to 4 working days to issue an Abnormal Load Permit.**
eRECEIPT NUMBER:

Please quote eReceipt Number here

