

**CRAWFORD COUNTY ROAD COMMISSION
SPECIAL FROST LAW PERMIT APPLICATION**

**\$50.00 - One Time - One Way
\$1,000.00 Per Mile - Multiple Moves**

Date of Movement: _____

As owner, I (we) hereby request permission to transport the following Building or Special Load on the roads under the jurisdiction of the Crawford County Road Commission and attest that these loads do not exceed the maximum allowed as listed below. Applicant agrees to comply with all rules and regulations of this permit.

APPLICANT MAILING ADDRESS FOR PERMIT	CONTRACTOR
Applicant's Name:	Contractor's Name:
Mailing Address:	Mailing Address:
City: _____ State: _____ Zip Code: _____	City: _____ State: _____ Zip Code: _____
Phone Number:	Phone Number:
Fax Number:	Fax Number:

(Applicant's Signature) Title: _____ Date: _____	(Contractor's Signature) Title: _____ Date: _____
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Please Note - List transporting vehicles (trucks, tractors, lowboys, etc.) and the construction equipment that will be moved, either loaded or self-propelled. List only one vehicle or item of equipment per page.

TYPE OF EQUIPMENT _____ MAKE & MODEL _____ UNIT NO. _____

LICENSE NO. _____ EXP. DATE _____ WEIGHT _____ WIDTH _____

HEIGHT* _____ LENGTH _____ * For Trailers indicate deck height.

Weight - Axle Spacing - Tires

AXLE NO. →	1	2	3	4	5	6	7
* AXLE WEIGHT							
*TIRE WIDTH IN INCHES							
*NO. OF TIRES							
AXLE NO. →	8	9	10	11	12	13	14
* AXLE WEIGHT							
*TIRE WIDTH IN INCHES							
*NO. OF TIRES							

Route Information:

To: _____ FROM: _____

VIA: _____

BOARD OF COUNTY ROAD COMMISSIONERS of Crawford County, Michigan
ADDRESS: 500 Huron St., Grayling, MI 49738
PHONE: (989) 348-2281 FAX: (989) 348-6933