## TOWNSHIP OF FRAZER

## Pennsylvania

## AUTHORIZATION TO EXCEED A POSTED HIGHWAY WEIGHT RESTRICTION

Permit No:				
Name of User:	Phone:			
Street Address:				
City:	State:	Zip Code:	Zip Code:	
This authorization is for a Type Municipal Highway (s) indicated belo		ton gross weight limit	on portions of	
COUNTY MUNICIPALITY	MUNICIPAL HIGHWAY	FROM	ТО	
Move Begins:	_ Move Ends:	Fee:		
Truck License/St:	/			
Trailer License/St:				
Remarks:				
I, the undersigned, hereby certify that belief.	the data submitted is corr	ect to the best of my know	ledge and	
Signature & Title: X		Date:		
AUTHORIZATION TO EXCI The above authorization is approve Municipality regulations (in particular restrictions set forth herein or attached This authorization shall be carried specified above (except Type 2 Permithereof by any number of over-posted Issuance Date:	ed subject to Section 4902 r 67 PA Code Chapter 189 d to exceed any licensed n in the permitted vehicle w ts which authorize use of l-weight vehicles being dr	of the "Vehicle Code" and subject to any condition naximum size or weight ling the traveling upon the high a particular posted highwaiven to or from a common	d all s or mit. ghway y or potion destination).	
Issuance Date:	Municipa	l Official	<del></del>	
Expiration Date:				