

CLARE COUNTY COUNCIL

An Irish Version of this Form is available on Request

Application Form for permit to authorise the use of a vehicle on Public Roads maintained by Clare County Council where such vehicle contravenes Regulation 59 of the Road Traffic (Construction, Equipment and Use of Vehicles) Regulations 2003 as set out by the Department of the Environment and Local Government.

Applicant's Name:	
	Fax No.:
the Shannon Bridges at Ballin available at both locations. T County Councils):	(please note that no abnormal load applications will be considered over na/Killaloe and O'Briensbridge/Montpelier due to the restricted widths 'his policy is also being implemented by Limerick & North Tipperary
	sed Journeys:
Particulars of Vehicles:	
N.B. Evidence of company No. 4)	& motor insurance to be submitted with application (please see point
Reg. No.	
Description of Vehicle:	
(e.g. 2 Axle tractor, single as	
Description of Load:	
Overall Length of Vehicle &	k Load:
Overall Width of Vehicle &	Load:

Maximum Height of Veh	_									
Unladen Weight of Tract										
Unladen Weight of Traile										
Gross Weight Of Load: _	-									
No. of Axles:	_									
	Axle 1	Axle 2	Axle 3	Axle 4	Axle 5	Axle 6	Axle 7	Axle 8		
No. of wheels per axle:										
Approx weight on axle (tonnes):										
Distance of next axle (metres):										
 NOTE: Applicants are advised that they must give four days notice of this application to the Commissioner of the Garda Síochána and such notice shall be accompanied by a copy of this application. I/We wish to apply for a permit to use the above specified vehicle on the date(s) set out above on the public roads maintained by Clare County Council and I/We agree to indemnify the County Council against any damage to roads or bridges within the County, caused directly or indirectly to this transport, and of which notice is given within twelve months of the date of the said transport, I/We confirm that the required notice of four days has been given to the Commissioner of the Garda Síochána. Enclosed fee:										
Signed: Date:										
For Office use only:										
Approval Granted by:		Execu	tive Eng			 rtmant				

Procedure relating to application for Abnormal Load Permit

Road Traffic (Construction, Equipment, and use of Vehicles) Regulations, 1963 as amended

Where it is proposed to carry a load which is such that the gross weight or axle weight are in excess of the legal limits or the dimensional of projecting limits are breached, a permit must be obtained from the relevant local authority or authorities through whose functional area(s) the load will be carried.

Clare County Council require the following procedure be adhered to when applying for a permit for an abnormal load;

- 1. Completed application form must be submitted at least **4 clear days** prior to movement of load.
- 2. A copy of completed application form must also be submitted to the Commissioner of the Garda Síochána **4 days prior** to movement of load.
- 3. Any permit issued is on the basis of the Vehicle Registration Number and is not transferable to any other Vehicle Registration Number.
- 4. When submitting your Application please submit to this Office a copy of your company & motor insurance policy. Public Liability and All Risks Insurance should show that Clare County Council are indemnified by you a copy of same will be kept on file until the expiry date.
- 5. The fee for a single journey is \in 78.00
- 6. A six month permit is available at a fee of €505.00
- 7. The applicant / licensee must satisfy themselves, Clare County Council, the Garda Síochána & relevant utility companies that the proposed route is capable of accommodating the load in terms of width, length, height & weight envisaged and that no delays, hold-ups or disruption will be caused to other traffic
- 8. Responsibility for ensuring that the route indicated on the permit application is suitable lies solely with the applicant / licensee and s/he is responsible for any damage caused and for the repairs resulting.

ADDRESS: Áras Contae an Chláir, New Road, Ennis, Co. Clare Tel. No. (065) 6846312

CARD PAYMENT OPTION																
Master	Card	l 🗆	VISA □ AMEX □							LASER						
Cardholder Signature:																
Card Account Number:																
Security No. (Last 3 digits located on signature panel) Expiry Date/																
I authorise Clare County Council to debit the sum of €							from this account.									
Signed:																