RC-1 **Richland County**

Engineer's Office

Mail 77 N. Mulberry Street Or Mansfield, OH 44902 Deliver TEL (419) 774-5591 То

(cluna@rcengineer.com)

ATTENTION: ALL OHIO DEPARTMENT OF TRANSPORTATION PERMIT REQUIREMENTS (OHIO SPECIAL HAULING PERMITS, REGULATIONS AND POLICIES) AND SECTIONS OF THE OHIO REVISED CODE APPLICABLE TO STATE HIGHWAYS AND BRIDGES PERTAIN TO THIS PERMIT EXCEPT WHERE THESE REGULATIONS OR SECTIONS OF LAW ARE CLEARLY NOT APPLICABLE TO COUNTY OR TOWNSHIP USE.

Please Type or Print so it is Legible / All Dimensions Must be in Feet and Inches

Applicant Name - Owner / Lessee / Insured (of Vehicle)						Permit Number (include Rev. number)										
Address (Mailing)						Applica	ation Da	ate								
City State Zip Code							Area Code/Telephone Number									
Person Requesting F	Permit					DOT N	l lumber									
All Weights Legal? Yes V			Variou	Various Trailers? Yes				Conveyance: Loaded				Towed Self-Propelled				
Vehicle Information Make			No. Axles			License Number			State	Length	gth Empty Weight		Width		Heiç	ght
Power Unit				AXICS												
Trailer 1																
Trailer 2																
Trailer 3																
Load Information	on Make	Make (if applicable)		Model (if applicab		plicabl	e) Ler		ngth	Width	Height		Wei	ght]	
Load																
Load Description]	
Overall Vehicle	Overall Vehicle Dimensions			Front Overhang		Rear Overhang		Deck Height of Trailer		Minimur			ax Trailer]	
Length Width	Height	Height Weig								Underclearance		Width			<u> </u>	
															J	
Total Number o	of Axles =			CC	MPLET	E ON	LY IF O	VERWI	EIGHT ((Please use an	d RC-1	W if mo	re than	9 axle	s)	
	Axle 1 (Fro	nt) Ax	de 2	Axle	3	Ax	le 4	Axl	e 5	Axle 6	A	xle 7	Axle	e 8	Axle	e 9
Load (Axle Weigh	nts)															
Number of Tires																
Tire Width			1		.							1			<u> </u>	
Spacing Between	n Axles															
					ROU1	TING II		IATION								
From (Location, Mur	nicipality, State)						To (Sp	ecific L	ocation))						
			VIA CO	NA VTINIT	ID/OP T	OWNG	LID HI	ICHW V	VS (RE	SPECIFIC)						
			VIAC	JUNII AN	ID/OK I	OWING	JUIL UI	IGHWA	13 (BE	SPECIFIC)						
Comments:																
Desired Effective	Date:			Pe	rmit Trai	nsmitta	al:		FAX	Mail		Pick-up				
									FAX N	umber					-	
PERMIT: (check as	applicable)				Rev	ision									Escr	ow
SINGLE TRIP: BLANK			<u>΄</u>			Fee	\$		Paid By	/ :				Acco		
Trip			Boat												-	
	Round Trip Construction Equipment											Chec				
		ufacturing Building						Cash					Money	Order		
90-Day Marina 90-Day & Return (N/A for Steel Coil)						Ma	ko ch	ocke r	payable to:	BICHI	I AND (COLIN.	TV F	NGINE	FP	
365-D		or oreer () (ii)	SUPERLO	AD:		IVIA	ine cili	cons þ	oayabie iu.			JOUN	🗀	TONTE	
365-Day & Return (N/A for Steel Coil)																
Number of Expected Trips during Round Trip						Appro	ved: _									
Life of	f Continuing or Bl	anket Per	mit		-									R	evised 1-	-16-25

RC-1W Page 2

RICHLAND COUNTY ENGINEER'S OFFICE

PERMIT NUMBER (if applicable)

TO BE ATTACHED TO PERMIT FORM RC-1 WHEN NUMBER OF AXLES EXCEEDS NINE (9)

	Axle Spacings (Feet & Inches)	Axle Number			No. of	Tires Axle	Tire Size		
А	(i eet & inches)	1	VVCI	grits	рег	-MIC	OI	26	
		2							
В		3							
С		4							
D		5							
E									
F		6							
G		7							
Н		- 8							
'' 		9							
		10							
J		11							
K		12							
L		13							
М		14							
N		15							
0									
Р		16							
Q		17							
R		18							
s		19							
		20							
Т		21							
U		22							

TOTAL GROSS WEIGHT