

APPLICATION - ROUTE SURVEY

THIS SURVEY IS VALID FOR 21 DAYS FROM DATE SURVEY IS PHYSICALLY PERFORMED Application ID#:

Conducted For Whom Route Surveyor Name or Company ORIGIN State PA County State Route Direction Miles/Direction from Intersection Starting Point Point of Interest Intersection DESTINATION State PA County State Route Direction Miles/Direction from Intersection Point of Interest Ending Point Intersection Width Height Length Gross Weight Inches Inches Feet Inches Lbs Feet Feet

Insert photos here	Hwy/Road	Mile Marker	Description: List of overhead obstructions, dimensional conflicts regarding width or height, railroad crossings with contact phone numbers & parking/staging locations, jurisdictional boundaries with contacts & traffic clearing locations. Identify type of strategy used to mitigate each conflict.

The route has been physically surveyed and is hereby certified that (1) there is safe and sufficient clearance throughout the entire proposed routing as detailed below, (2) turns at all intersections can be traversed, (3) all overhead structures can be traveled under, (4) steep grades can be traversed, (5) cities are identified, (6) all parking and stop-off locations are identified, (7) the vehicle Gross Weight does not exceed any highway or bridge posted weight limit, (8) the survey has been physically performed by actually driving the entire proposed routes, (9) State Routes are identified by SR number, (10) local roads and streets and other non-PA state highways are listed in (parentheses) for routing continuity, and that authorization for their use will be obtained by the applicant from the appropriate authority.

Check here if there are additional entries.

Surveyor Signature	Date	
Surveyor Phone Number	Surveyor Fax Number	
Surveyor Email Address		

FALSE INFORMATION GIVEN ON THE PERMIT APPLICATION SHALL AUTOMATICALLY INVALIDATE THE PERMIT. THIS DOCUMENT MUST BE COMPLETED BY SURVEYOR

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