

**MUNICIPALITY OF NORRISTOWN  
PUBLIC WORKS DEPARTMENT**

235 E. Airy St.  
Norristown, PA 19401  
610-270-0437  
610-279-3603 fax

**TRANSPORT OVERSIZE/OVERWEIGHT LOAD  
PERMIT APPLICATION**

Permit # \_\_\_\_\_ Date \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_ Fax # \_\_\_\_\_

Start Date \_\_\_\_\_ Time \_\_\_\_\_

Truck/Equipment \_\_\_\_\_ Size/Weight \_\_\_\_\_

Route \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Permit Fee \$100.00

(Acct. 01.322.305900)

It is hereby stipulated and agreed that the above work shall be executed in strict conformity with the provisions of all existing Ordinances governing such work, and under the direction and subject to the approval of the Public Works Director.

The undersigned further agrees to indemnify and save harmless the Municipality of Norristown from any and all loss, expenses and damages in any manner sustained through or by reason of the issue of the said permit, or by the doing of work under it, or by negligence, imperfect work, acts of omissions of the aforesaid (person, firm or corporation), or his (or their) employees.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Approved