

LEAKE COUNTY ROAD & BRIDGE DEPARTMENT
ROUTING PERMIT

PERMIT

THIS PERMIT EXPIRES 90 DAYS FROM ISSUE DATE

No

ISSUE DATE _____ TIME _____

MDOT DECAL NO. _____ LICENSE PLATE NO. _____

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

COMPANY CONTACT _____ EMAIL _____

HAULER'S NAME _____ COMPANY / CONTRACT _____

CONTACT'S PHONE NO. _____ FAX NO. _____

NO. OF TRUCKS: OWNED _____ CONTRACTED _____

MATERIAL BEING HAULED: LOGS _____ DIRT _____ LITTER _____ OTHER _____

MATERIALS DESTINATION _____

TOTAL ESTIMATED NO. OF LOADS _____

ESTIMATED TIME OF JOB COMPLETION _____ (PERMIT EXPIRES IN 90 DAYS)

LANDOWNER'S NAME _____

SECTION _____ TOWNSHIP _____ RANGE _____

WAS PERFORMANCE BOND PAID TO LANDOWNER: YES _____ NO _____

BOND AMOUNT _____

ROUTE _____

COPY OF CURRENT CERTIFICATE OF LIABILITY RECEIVED? YES _____ NO _____

CERTIFICATE CAN BE FAXED TO (601) 267-6133 AND MUST BE RECEIVED BEFORE PERMIT IS VALID.

**** CONDITION: IF RAINING OR MUDDY, TRUCKS SHALL NOT HAUL UNTIL IT DRIES UP! ****

THE CONTRACTOR AGREES TO COMPLY WITH ALL TERMS AND CONDITIONS OF THE LEAKE COUNTY BOARD OF SUPERVISORS ORDINANCE GOVERNING THE ISSUANCE OF ROUTE PERMITS. EACH TRUCK, WHETHER OWNED OR CONTRACTED IS REQUIRED TO HAVE THEIR OWN PERMIT. IT IS THE RESPONSIBILITY OF THE OWNER OR OPERATOR TO MAKE SURE THAT THE PERMIT IS CURRENT.

I HAVE READ, UNDERSTAND AND AGREE TO ALL TERMS OF THIS ROUTING PERMIT.

Company Representative Signature _____

Reviewed by _____ Approved By _____

THIS PERMIT DOES NOT EXEMPT PARTIES FROM LIABILITY OF DAMAGES TO PROPERTY/ROADS