MARATHON COUNTY HIGHWAY DEPARTMENT

Milk Hauler - Seasonal Weight Limit Posting Permit

MILK HAULER MULTI TRIP PERMIT	**Mail To: Marathon County Highway Dept**
To transport a load exceeding statutory size and/or weight.	**1430 West St. Wausau Wis. 54401**
This form cannot be used for permitting mobile homes/modular building sections	**Office** 715-261-1800 **Fax** 715-261-1810
Dan Raczkowski - **email** - dan.raczkowski@co.marathon.wi.us	Dan Raczkowski Phone - 715-261-1816

Applicant Name	**Insurance Company**
Address	**Insurance Company Address & Contact Phone Number**
City - State - Zip Code	**Policy Number** / **Policy Expiration Date**
Telephone #	**Fax #**
Cell #	**Email**

MARATHON COUNTY MILK HAULER PERMIT POLICY - SEASONAL WEIGHT POSTING

THIS MILK HAULER POLICY WAS ESTABLISHED ON 4-3-2008 THE POLICY STATES : MARATHON COUNTY HIGHWAY DEPT WILL ISSUE PERMITS TO VEHICLES TRANSPORTING MILK FROM THE POINT OF PRODUCTION TO THE NEAREST MAIN UNPOSTED ROAD, ALLOWING LEGAL LOADS ONLY AS PROVIDED IN S.S. 348.15(3)(C)(BG). THE HAULER WILL WORK WITH THE COMMISSIONER TO ESTABLISH THE MOST DIRECT ROUTE HAVING THE LEAST IMPACT ON THE COUNTY HIGHWAYS, THE LEAST IMPACTED ROUTE MIGHT NOT BE THE SHORTEST ROUTE. THIS POLICY ONLY AFFECTS COUNTY HIGHWAYS AND DOES NOT EXEMPT THE MILK HAULER TO HAUL OVER ANY POSTED BRIDGE OF WHICH THEY EXCEED THE POSTED WEIGHT. THE HAULER SHALL PAY ONE ANNUAL PERMIT FEE AT THE CURRENT RATE.

THIS PERMIT MUST BE REVIEWED AND RENEWED ANNUALLY. **CURRENT PERMIT FEE IS $50.00**

Truck or Trailer Make	Year	Lic Weight	No. of Axles	License Plate Number	State

NOTE - Route Information must be provided in advance, for each vehicle requesting a permit. This information must include a MAP showing the County Highways travelled by that vehicle and the corresponding addresses of the pick up locations for that vehicle. A copy of this permit, the route map & addresses must also be kept in each permitted vehicle.

Seasonal Weight Limit Posting - Milk Hauler - Permit Fee $50.00 Paid on _____Check # _____

Acceptance of Conditions: I, the applicant, certify that the statements contained in the application are true and correct, and that if granted a permit, I will comply with all terms and conditions which apply.

Applicant Signature Date

Authorized By Title Date

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