

Highway Use Permit Application Form



APPLICANT INFORMATION

Application Date: _____

Company Name: _____

Address: _____ Postal Code: _____

Telephone Number: _____ Fax Number: _____ Cell Number: _____

PROJECT INFORMATION

Address/Location of Project: _____

Dates Permit Required – From: _____ To: _____

Site Supervisor: _____ Phone: _____

PURPOSE OF PERMIT

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Driveway/Culvert Crossing | <input type="checkbox"/> Traffic Control | <input type="checkbox"/> Oversize Load | <input type="checkbox"/> Filming |
| <input type="checkbox"/> Bin/Pod | <input type="checkbox"/> Groundwater Sampling | <input type="checkbox"/> House Move | <input type="checkbox"/> Special Event |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Soil Deposit | <input type="checkbox"/> Dike/Gate Key | <input type="checkbox"/> Other _____ |

DESCRIPTION OF WORK

ADDITIONAL APPLICATION REQUIREMENTS

- Site map showing location and pertinent details
- Drawing(s) showing construction details
- Photographs of project
- Security deposit
- WCB certification
- Delta Business License
- Certificate of Insurance in the amount of \$2 Million, naming City of Delta as additional Insured
- Traffic Management Plan
- Other



City of Delta
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