

THE CORPORATION OF THE TOWNSHIP OF BROCK ROAD OCCUPANCY APPLICATION/PERMIT

This permit shall be on the job site or with the moving vehicle at all times.

PERMIT NO. (For Office Use Only)

Applicant's Name & Address Please print	Telephone	Date
The undersigned hereby applies to occupy the following Municipal Roads		
Occupation Date	Duration	
Cut Location		
Road:	_ Length:	Width: Area:
Shoulder or Boulevard:	Length:	Width: Area:
Comments:		
MOVING – Wide or Heavy Loads: Police and utility escorts will be arranged by the applicant.		
Permission is hereby requested to move		
Maximum Width metres Length metres Height when loaded metres		
Weight when loaded tonnes Moving Firm		
Dates & Times of Move		
Agreement: "I/We hereby agree to assume liability for all costs, expenses and damages incurred by the Township of Brock and others as a result of the above move / aforesaid closure or occupancy and to indemnify and save harmless the Township of Brock from any actions, claims, suits or demands made against the Township of Brock by any person arising out of the issuance of this road occupancy application."		
Signature of Applicant		Date:
Approved: Township of Brock		Date: