

ENGINEERING DIVISION

Heavy & Oversize Load Application

A Permit is required for travel on municipal roads within the City of Thunder Bay when the combined vehicle and load exceed the size or weight limits set out in the *Highway Traffic Act*.

Questions? For questions about this permitting process, contact the City of Thunder Bay, Engineering Division at 807.625.2266.

ANNUAL PERMIT APPLICANTS

If applying for an annual permit, provide:

- the maximum anticipated dimensions and gross weight for the permit period;
- all known origins, destinations and anticipated routes; and
- prior notice to the City of Thunder Bay of any proposed move that exceeds the maximum dimensions or weight identified in the application, or any route change involving an area that may require special consideration.

SIZE AND WEIGHT (metric) OF COMBINED VEHICLE AND LOAD:

Height:(m)_____ Width:(m)_____ Length:(m)_____ Gross Weight:(kg) _____

CONTACT INFORMATION: (Please print)

NAME OF APPLICANT			
STREET ADDRESS	CITY/TOWN	PROVINCE	POSTAL CODE
CONTACT PERSON	PHONE	EMAIL	
NAME OF CARRIER (if different from applicant)			
STREET ADDRESS	CITY/TOWN	PROVINCE	POSTAL CODE
CONTACT PERSON	PHONE	EMAIL	

TYPE OF PERMIT (Select one)

☐

Single Trip Permit (\$130)

☐

Annual Permit (\$270)

VEHICLE/EQUIPMENT USED FOR THE MOVE:

YEAR	MAKE	MODEL	LICENSE PLATE NUMBER
DESCRIPTION/CONFIGURATION			

Provide details for each vehicle and equipment component involved in the move, including tractors, jeeps, boosters and any other related units.

If additional space is required, attach a separate page and label it with the applicant's name and section title.

DESCRIBE THE LOAD BEING MOVED: (e.g. equipment type, whether indivisible, notable overhang and any special handling requirements)

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PROPOSED ROUTE DETAILS:

DATE OF MOVE (MM-DD-YYYY)	TIME OF MOVE (From): AM PM	TIME OF MOVE (To): AM PM
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Moves must be made between sunrise and sunset only.

DETAILS OF ROUTE:

Provide the proposed route on municipal roads, including origin, destination, road names, turning movements where relevant and attach a route map.

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Special conditions apply to the following structures and corridors. If your route uses any of them, identify this in your application. Additional review or permits may be required.

- | | |
|---|--|
| ☐ Main Street Bridge (Intercity) | ☐ James Street Underpass |
| ☐ Pacific Avenue Bridge (East End) | ☐ Strathcona Avenue/Lakeshore Drive Underpass |
| ☐ McKellar Island Bridge | |

IMPORTANT NOTES:

PROVINCIAL HIGHWAYS - The Ministry of Transportation (MTO) has jurisdiction over King's highways in Ontario. Contact MTO directly as separate approvals may be required for travel on provincial highways.

POLICE ESCORTS - Where a police escort is required, the applicant must apply directly through the Thunder Bay Police Service paid duty process.

STRUCTURAL REVIEW - For exceptionally large or heavy loads, the City may require a structural review of the proposed route. This may affect processing timelines and permit issuance.

UTILITY INFRASTRUCTURE - Applicants must not move, lift, disconnect or otherwise interfere with electrical, telecommunications, cable or other overhead or underground utility infrastructure. Interference with utility infrastructure is unsafe and may result in injury, service disruptions, fines or other legal consequences.

ADVANCE NOTICE TO UTILITIES & AGENCIES - The applicant must provide sufficient advance notice of the proposed move to all affected utilities and agencies to allow time for review and any necessary arrangements. Required notice periods may vary depending on the service provider and nature of the move.

APPLICANT RESPONSIBILITIES - The applicant is responsible for:

- Reviewing the Dimensions Table to determine whether the proposed move requires an escort;
- Determining whether notification to and written approval from any affected utility, agency or service provider is required;
- Obtaining all required written approvals and submitting written confirmation of those approvals to the City of Thunder Bay, Engineering Division, before a permit can be issued; and
- Arranging and paying for any required escorts.

DIMENSIONS TABLE

Description	Escort Required	Notification Required	Additional Information Required
Height over 4.15 m (13.61 ft)	Police Escort	ALL contacts on Contact List	Written approvals
Width 2.61 m to 3.99 m (8.56 – 13.09 ft)	No Escort	None specified	None
Width 4.00 m to 4.99 m (13.12 - 16.37 ft)	Private Escort	None specified	None
Width 5.00 m (16.40 ft) or more	Police Escort	Thunder Bay Police Service Traffic Sergeant & Finance/Paid-Duty Coordinator	None
Length 23.01 m to 36.75 m (75.49 - 120.57 ft)	No Escort	None specified	None
Length 36.76 m to 45.74 m (120.60 - 150.06 ft)	Private Escort	None specified	None
Length 45.75 m (150.09 ft) or more	Police Escort	Thunder Bay Police Service Traffic Sergeant & Finance/Paid-Duty Coordinator	None
Weight over 63,500 kg (139,993 lb)	Based on Review	None specified	Axle configuration

CONTACT LIST

SERVICE	CONTACT	PHONE/EMAIL	FAX
Thunder Bay Police Service	Traffic Sergeant	807.684.1200	807.346.1206
Thunder Bay Police Service	Finance/Paid-Duty Coordinator	807.684.1281	807.346.0775
Synergy North	VP Lines & Operations	807.343.1176 or clerks@synergynorth.ca	807.344.3032
Tbaytel	Outside Plant Engineering Clerk	oversizedloadrequests@tbaytel.com	
Rogers Communication	Project Coordinator	ProjectManagerOntario@rci.rogers.com	
Traffic & Street Lighting	Supervisor	807.684.2453	807.346.5993

Applicants are responsible for confirming current contact information before submitting notifications.

Applicant Declaration and Acknowledgment

By signing this application, I acknowledge and agree that:

- I have read and understand the requirements of this application, including any required approvals, notifications and escorts;
- I am authorized to submit this application and make these declarations on behalf of the applicant/carrier;

The undersigned acknowledges that notwithstanding the issuance of a permit pursuant hereto; the owner, operator and mover of any vehicle, object or contrivance are responsible for all damages that may be caused to the highways or streets by reason of the driving, operation or moving thereof. Proof of insurance must be provided, naming the City as Additional Insured in accordance with the Certificate of Insurance attached as Schedule 'C'.

I certify that the information provided in this application is complete and accurate to the best of my knowledge.

Signature Block

Name and title of authorized signing officer

Company Name

Signature

Date

Any personal information collected on this form is done so under the authority of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). Questions specific to MFIPPA should be directed to the Corporate Records Manager and City Archivist, 500 Donald Street East, Thunder Bay, Ontario, P7E 5V3, 807.625.2270 or email archives@thunderbay.ca.

PROOF OF LIABILITY INSURANCE WILL BE ACCEPTED ON THIS FORM ONLY

THE CORPORATION OF THE CITY OF THUNDER BAY

**CERTIFICATE OF INSURANCE
(HEAVY & OVERSIZED LOAD)**

Equipment to be Moved:	Date of Move/Permit Period:

NAMED INSURED(S): _____

AND THE CORPORATION OF THE CITY OF THUNDER BAY as Additional Insured but only with respect to potential liability arising out of the activities of the Named Insured.

POLICY	COMPANY & POLICY NO.	DATE		LIMITS OF LIABILITY
		EFFECTIVE MM-DD-YYYY	EXPIRATION MM-DD-YYYY	
GENERAL LIABILITY BODILY INJURY PROPERTY DAMAGE				Minimum Requirement \$2,000,000 Inclusive per occurrence
AUTOMOBILE LIABILITY (must cover all vehicles owned by or operated by or on behalf of Insured) BODILY INJURY PROPERTY DAMAGE				Minimum Requirement \$2,000,000 Inclusive per occurrence
OTHER (Describe)				

IMPORTANT: This Certificate confirms that Policies listed above are in full force and effect and that these Policies will not be amended to materially restrict coverage as set out in this Certificate or cancelled without thirty (30) days prior written notice being given to The Corporation of the City of Thunder Bay, and further that the General Liability Policy listed above includes all coverages outlined under (1), (2), (3) and (4) below.

GENERAL LIABILITY COVERAGE INCLUDES:

- 1) Completed Operations
- 2) Non-Owned Automobile Liability
- 3) Broad Form Property Damage
- 4) Cross Liability

DATE (MM-DD-YYYY)

NAME OF INSURANCE BROKER

ADDRESS OF INSURANCE BROKER

SIGNATURE OF AUTHORIZED REPRESENTATIVE OF
INSURANCE COMPANY