

City of Sharon Overweight/Oversize Permit

Perm	it I	Νo
------	------	----

(office use only)

The proper City officials are hereby authorized to issue overweight permits for vehicles operating within the City, in accordance with the provisions of the Pennsylvania Vehicle Code, 75 Pa. C.S.A 4968 and 75 Pa. C.S.A. 4961, as amended. City officials may issue permits at a single instance, or for multiple usages by an identified vehicle during a twelve-month period.

Single Instance: Forty-three dollars (\$43.00) if said vehicle is less than or equal to fourteen (14) feet wide.

Ninety-three dollars (\$93.00) if said vehicle is greater than fourteen (14) feet wide.

Calendar year: Fee shall be determined by the finance director based on the estimated number of trips to be completed

during the current year per each vehicle route permitted.

Council may, by resolution, amend the fee to be charged for the permit or permits, provided, however, that any such amendment shall not affect the permits issued prior to the effective date of that amending resolution.

(Ord. 7-95 Passed 5-25-95; Ord. 14-03 Passed 10-16-03; Ord. 01-2024 Passed 4-3-2024)

Submission: In Person/Mail: 155 W Connelly Blvd, Sharon PA 16146

Fax: (724) 983-1961

Email: kpeterson@cityofsharon.net

The applicant must provide payment by either mailing a check (payable to the City of Sharon) or in-person at City

Administration offi the permit has bee		ress above. Th	ie permit ap	plication will not b	e issued until the p	ayment for the full amount of
Section A. Type	e of Permit P	lequested:	Multip	le Trips (Annual Per	rmit)	
D)ate:		Estimated number of trips per year:			
Section B. Appl	icant Inforn	nation				
Name (Responsil	ble Motor Car	rier)				
Company Addres	38			_	_	
City			State		Zip	
Phone				Email		
Section C. Size	/Weight Info	ormation				
Load Description	ı (ex: steel coi	ls)				
Gross Weight	Axle Weig	ghts: Front Tar Rear Tan	ndem (or ax			
Width		Length		Height		# of Axles

Section D. Vehicle Information

Equipment Type (Power & Drawn Ur	nits)	Vehicle Plate #	State	Vehicle VIN
If registering more than 5 vehicles	, please uti	lize Additional Vehicle	Information	on attachment (page 3)
Section E. Route Information				
Origin:				
Destination:				
Route(s): Please list all routes	including	all City streets to be	traveled	upon in order.
Section F. Required Attachmer	ts			
In addition to this application,		lude:		
A copy of your Penn DOT Special Hauling Permit issued for said route(s)				
A Certificate of Insurance providing the City of Sharon is added as an additional insured for				
property damage and personal injury.				
property damage and personat injury.				
Applicant Nama/Signatura				Data
Applicant Name/Signature: Date:				
Data Anniliantian Danainad		Office Use Only		- Decimand Decimal
Date Application Received		Fee Due	Date	e Payment Received
Approved	lot Approved	d (Reason)		
Name	Signatu	re	Da	ate

Additional Vehicle Information

Equipment Type (Power & Drawn Units)	Vehicle Plate #	State	Vehicle VIN