

**Fee of \$150.00 Payable to  
County of Nemaha Must Accompany Application**

**Application to Move Oversized Vehicles & Loads  
Nemaha County, Nebraska**

A valid "Certificate of Insurance" shall be attached to application.

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Phone Number \_\_\_\_\_ Please circle: Work Cell

Vehicle Owner \_\_\_\_\_

Address: \_\_\_\_\_

Trailer Owner \_\_\_\_\_

Address: \_\_\_\_\_

Truck Make \_\_\_\_\_ Truck Year \_\_\_\_\_ License # \_\_\_\_\_

Trailer Make \_\_\_\_\_ Trailer Year \_\_\_\_\_ License # \_\_\_\_\_

Overall Width \_\_\_\_\_ Overall Length \_\_\_\_\_

Total Weight of Truck, Truck Tractor, and Trailer \_\_\_\_\_

Total Weight of Load \_\_\_\_\_

Total Weight \_\_\_\_\_

No. Axles	1	2	3	4	5	6	7	8	9
Axle Spacing									
Weight on Each Axle									

Route Description: (Route to be traveled must be attached to application)

\_\_\_\_\_  
\_\_\_\_\_

The move will be made between the hours of \_\_\_\_\_ and \_\_\_\_\_ beginning on \_\_\_\_\_, 20\_\_\_\_ and ending on \_\_\_\_\_, 20\_\_\_\_\_.

Trip(s): \_\_\_\_\_ Permit Valid for \_\_\_\_\_ days from date of issuance.

Signature: \_\_\_\_\_

Date received in the Nemaha County Clerk's Office: \_\_\_\_\_