

TOWN OF OSSIPEE HIGHWAY DEPARTMENT

55 Main Street P. O. Box 67 Center Ossipee, NH 03814-0067

Phone: (603) 539-8417 Fax (603) 539-4183

APPLICATION FOR EXCEPTION TO ROAD RESTRICTIONS

Date of Request:	Date(s) for Use: /
Company/Firm:	Phone:
Operator/Logger:	Phone:
# of Loads: Truck Size:	Color:
Description of Load:	
Property Origination (Location):	
Route Traveled:	
responsible for any damage.	ning, Stay in the middle of the road – off the shoulders. You are
Road Inspection/Prior to Activity: (Operator/Town 1	Highway Representative) Condition:
Road Inspection/After Activity: (Operator/Town Hi	ighway Representative) Condition:
	OAD RESTRICTIONS WITHIN THE TOWN OF OSSIPEE.
ITY FOR ANY DAMAGE TO THIS STRUCTUR	RELIEVE THE CONTRACTORS OF CORRECTIVE RESPONSIBILE CAUSED BY THE HAUL. THE CONTRACTOR WILL NOT HOLD REES, AGENTS, OR ASSIGNS OF THE TOWN RESPONSIBLE FOR LEGED TO HAVE INCURRED.
	Date:
Signature of Operator	
	Date:

Signature of Public Works Director

^{*}Approved Form Must Be Displayed with Vehicle