

TOWN OF DAYTON PERMIT# _____
SINGLE_TRIP SPRING WEIGHT LIMIT REQUEST FORM

Company Name _____ Contact Person _____

Address _____

City/State/Zip _____

Telephone Number _____ Fax Number _____

Please fill out all information for EACH truck you need permitted below:

Vehicle	Truck #	Year	Make	Plate #
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____

Commodity Being Hauled (IE: Feed, Manure) _____

Reason for permit request **AND** date needed: _____

Name(s) of Persons Hauling _____

Roads Traveled (IE: West Road from STH 22 to Stratton Lake Road): _____

Number of Permits Requested x \$5.00

\$ _____
Amount Due Town of Dayton

Mail fee to:
Town of Dayton
N629 East Road
Waupaca WI 54981
715-258-0930

Permit Cost \$5 per vehicle

FOR FASTEST RESPONSE
EMAIL FORM TO
Dave Armstrong at darmstrong@town-dayton.com
FOR INFORMATION CALL
715-303-9926