

PERMIT APPLICATION TO TRANSPORT OVERSIZE/OVERWIEGHT VEHICLES OVER COUNTY RIGHTS-OF-WAY APPLICATION

**GROWTH MANAGEMENT DIVISION
ROW PERMITTING & INSPECTION
2800 NORTH HORSESHOE DRIVE, NAPLES, FLORIDA 34104
Telephone Number: 252-5767 Fax Number: 252-5828**

Right-of-way Permit # _____ Fee Amount \$ _____ Receipt # _____ Date Submitted: _____

Permit Request to move: _____ Over County Road(s): # _____
(Description of Vehicle) # _____

From: _____ Destination: _____

Via the following route (also submit detailed plan of route originating:

During the following times and dates: _____

FOR BUILDING MOVEMENTS ONLY:

Building weight: _____ Axle Spacing: _____ Number of axles: _____ Number of tires per axle: _____

The following facilities on the proposed route have been contacted and advised of the proposed move:

FACILITY	ADDRESS	REPRESENTATIVE	TITLE	DATE

All the following agencies have been contacted, as appropriate, and offer no objections:

	REPRESENTATIVE AND TITLE	APPROVED	DISAPPROVED
City of Naples	_____	_____	_____
Florida Highway Patrol	_____	_____	_____
FDOT (Submit copy of approved Permit)	_____	_____	_____
Collier County Sheriff's Dept.	_____	_____	_____
Building Review and Permitting	_____	_____	_____
Collier County DOT (Traffic Operation)	_____	_____	_____
Other: _____	_____	_____	_____

Stipulations/Comments: _____

Submission of this Permit Application certifies that all information contained hereon is correct. Permitting/Applicant acknowledges that any false statement will void the permit requested, and may result in denial of future permits or other penalties as appropriate.

I have a bond on file with the Tallahassee office of the State Road Department in the amount of \$ _____, Bond # _____;

OR

I have insurance on file with Collier County in the amount of \$ _____. Expiration date is: _____.
(Collier County must be names as an additional insured on all policies.)

Applicant/Permittee: _____ By: _____
Address: _____ (Representative and Title)
Telephone # _____

Permit Request Approved By: _____ Date: _____