



City Clerk's Office  
 300 W. Ash, Rm. 206  
 P.O. Box 736  
 Salina, KS 67402-0736  
 (785) 309-5735

<b>For office use only:</b>
Licensing Year: _____
License No: _____
Date Issued: _____

**APPLICATION FOR LICENSE TO MOVE AN OVERSIZED LOAD**

APPLICANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

DESCRIPTION OF ITEM BEING MOVED: \_\_\_\_\_

PRESENT LOCATION OF LOAD: \_\_\_\_\_

LOCATION TO BE MOVED TO: \_\_\_\_\_

ROUTE TO BE TRAVELED IN MOVING LOAD: \_\_\_\_\_

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

*(See Attached Map)*

MEASUREMENTS OF LOAD:

VERTICAL HEIGHT: \_\_\_\_\_', TOTAL WIDTH \_\_\_\_\_', TOTAL LENGTH \_\_\_\_\_'  
 , \_\_\_\_\_ TIRES PER AXLE, \_\_\_\_\_ LBS/AXLE)

DATE OF MOVING \_\_\_\_\_ DEPARTURE TIME: \_\_\_\_\_

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**Base Charge \$102.50      Over Two (2) Miles \$52.50 per mile**

\$ \_\_\_\_\_ has been paid. Receipt No. \_\_\_\_\_ Date \_\_\_\_\_ Received by \_\_\_\_\_

**Copy Application to:**  
 City Development Services Department  
 City Engineering Department  
 City Water Customer Accounting Department  
 County Appraiser's Office

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**Applicant agrees to give the below mentioned utilities and city departments not less than twenty-four (24) hours advance notice of actual operations and in the event moving operations are delayed, then applicant will again give said utilities and city departments not less than twenty-four (24) hours advance notice of said actual operations, with the exception of the City Building Inspector, City Engineer, and the City Clerk.**

**The undersigned hereby makes application for a permit to move the above described oversized load from its present location to the new location above described, over the route above mentioned under the provisions of THE SALINA CODE, hereby agreeing to comply with all provisions of THE SALINA CODE.**

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_

**RAILROADS TO BE CROSSED:**

Applicant is required to notify the railroad whose tracks are to be crossed of the intended date and hour of crossing within forty-eight (48) hours of that time. (Chapter 35, Article IV of the Salina Code.)

**A copy of the signed agreement of services (from Union Pacific Railroad) or Application for Right of Entry (from K&O Railroad) is required to be submitted with this application,**

**K & O Railroad (620) 231-2230  
Union Pacific 1-888-877-7267**

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**KANSAS GAS SERVICE**

In the opinion of a Gas Service official, it will be necessary to temporarily cut and move, or in any way interfere with any wires, cables or other aerial equipment.

I hereby (APPROVE / DISAPPROVE) this application.

If approved, this utility will be responsible for this action. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number (785) 822-3567

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**WESTAR ENERGY**

In the opinion of an Electric Service official, it will be necessary to temporarily cut and move, or in any way interfere with any wires, cables or other aerial equipment.

I hereby (APPROVE / DISAPPROVE) this application.

If approved, this utility will be responsible for this action. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number (785) 822-3588

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**COX COMMUNICATIONS:**

In the opinion of a Cox Cable Company official, it will be necessary to temporarily cut and move, or in any way interfere with any wires, cables or other aerial equipment.

I hereby (APPROVE / DISAPPROVE) this application.

If approved, this utility will be responsible for this action. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number: (785) 404-6257

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**AT & T:**

In the opinion of an AT & T official, it will be necessary to temporarily cut and move, or in any way interfere with any wires, cables or other aerial equipment.

I hereby (APPROVE / DISAPPROVE) this application.

If approved, this utility will be responsible for this action. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number: (785) 826-1002

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**CITY FORESTER:**

I hereby certify that the above application has been submitted to me.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number: (785) 826-7275

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**BUILDING INSPECTOR:**

**\*ONLY REQUIRED IF MOVING A BUILDING**

I hereby certify that I have inspected the above described building and that in my opinion it is in a proper and fit condition to be moved to the destination above mentioned, and will remain in a proper and fit condition for the use intended.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number: (785) 309-5715

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**FIRE CHIEF:**

I hereby certify that the above application has been submitted to me.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

Fire Chief or Designee \_\_\_\_\_

Phone number: (785) 826-7340

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**GENERAL SERVICES-TRAFFIC CONTROL:**

I hereby certify that the above application has been submitted to me. In the opinion of traffic control staff, it (WILL/WILL NOT) be necessary to move and/or hold traffic signal and street sign appurtenances.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

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

Phone Number: (785) 309-5750

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**CITY ENGINEER:**

I certify that the above application has been submitted to me

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

City Engineer or Designee \_\_\_\_\_

Phone number: (785)309-5725

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**POLICE DEPARTMENT:**

In the opinion of the Salina Police Department, this application (WILL / WILL NOT) require traffic control, and if needed police officers will be provided for this traffic control.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Phone number: (785) 826-7210

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**CITY CLERK:**

The person making the above application has paid the initial fee and has duly filed a \$5,000 surety bond as required in THE SALINA CODE and the same has been approved.

I hereby (APPROVE / DISAPPROVE) this application. Date \_\_\_\_\_

City Clerk \_\_\_\_\_

Phone number: (785) 309-5735

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