



**COOK COUNTY DEPARTMENT OF
TRANSPORTATION AND HIGHWAYS
PERMIT OFFICE**

George W. Dunne Cook County Office Building
69 West Washington Street, 23rd Fl. Chicago, IL 60602
Phone (312) 603-1670; Fax (312) 603-9943
hwy.permits@cookcountyil.gov

Office Use Only
Permit No. _____
Date Received _____

LIMITED CONTINUOUS ANNUAL HAUL PERMIT
APPLICATION

Application Fee: \$10.00

Payment Receipt No. _____

WHEREAS, _____
(Legal Name of Company)

LOCATED AT: _____
(Street)

(City) (State) (Zip)

Is requesting to use the Cook County Highways as follows:

Business Location - _____

SUBMITTED BY:
NAME : _____
PHONE : _____
FAX : _____
EMAIL : _____

COUNTY HIGHWAY(S)	ENDING POINT
1.	Must be two (2) miles or less from business location.
2.	
3.	

* Refer to County System Route maps at www.cookcountyil.gov/highway (select System Maps)

Limited annual permit is subject to the following conditions and the “**CONDITIONS FOR HAUL PERMIT.**”

I hereby request Cook County Department of Transportation and Highways Permission and authority to haul and/or transport the following:

Equipment: _____

METHOD OF MOVEMENT

Loaded Towed Own Power

UNIT / LICENSE

WEIGHT	LENGTH	HEIGHT	WIDTH	NO. AXLES
≤ 160,000			≤ 14'	

(Sketch may be required)

If the gross weight of this permit exceeds 120,000 pounds, provide ILLINOIS DEPARTMENT OF TRANSPORTATION PERMIT No.:

DATE: _____
Signature of President/Authorized Person of the Company

PRINT NAME: _____

PRINT TITLE: _____