

Application for Abnormal Load Permit to authorise the use of particular vehicle or combination of vehicles on public roads maintained by Cork County Council.

Please us	public roads mair see BLOCK CAPITALS when completing this form	itained by Cork Co	unty Cot	incii.			
1.	Name of Applicant:						
2.	Address of Applicant:						
3.	Contact Phone No.						
4.	Mobile Phone No.						
5.	Contact email address:						
6.	Registration No. of Vehicle:						
7.	Registration No. of Trailer:						
8.	Date(s) of entire Journey(s):						
9.	Confirm <u>exact</u> address for start point and end point of <u>entire</u> Journey :						
10.	In relation to CORK / CORK COUNTY element of the journey; please give date(s) of travel and start and finish travel times.  (please use 24 hour clock)	Date from:			Date to:		
44		From:		hrs	To	:	hrs
11.	Brief description of load:						
12.	Details (incl. <u>ALL</u> Road No.(s) of Proposed Route in COUNTY CORK (a highlighted map would be desirable for complex routes):						
	s the route governed by a condition of planning s this prescribed route being adhered to? If not						
	PARTICULARS						
1	14. Type/Description of Vehicle(s) / Load(s)						
-	15. Overall Weight of Vehicle(s) & Load(s)						
1 1 1	16. Maximum Loading on any one Axle relative You must specify the max axle loading regardless of who Note: If any axle loading exceeds 14 tonnes, and the proridges, underpasses or bridge-like culverts along the rousthall accompany this application, outlining the load bear withstand the load, assessed in accordance with NRA BI proposes to traverse a Railway Bridge shall require the Active and Description.	ether less than 14 tonne of roposed route traverses and te, a structural engineers ing capacity of such structural engineers. Any such load wapplicant to contact Iarnroad(s)	report etures to which				
	ie. longest measurement to include any overhangs	)					

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18. Overall Width (metres) of Vehicle(s) &		For Office Use	oniy – Per	mii INO	• • • • • • • • • • • • • • • • • • • •
(ie.widest measurement to include any side o	` '				
19. Maximum Height (metres) of Vehicle(s) & l	Load(s)				
Any load > 4.65m in height shall be accompanie		aration that the			
clearances available under any overhead bridg					
have been checked and are sufficient. A copy of					
to any overhead structure/gantry, along the rou					
		aximum height limit			
of 4.6m applies to the Jack Lynch Tunnel on N40		g Road and a separate			
permit is required from Cork City Council for this					
20. If your load exceeds 4.65m in height have yo					
as is required by their ESB Code of Practice, So					
21. If your load exceeds 4.65m in height are you					
available beneath overhead Eircom lines, along 22. If the load is due to pass underneath a railw		s / No / N/a			
•	/ay Underbridge(s) / No / N/a	nave you checked			
23. DIMENSIONS	VEHICLE	TRAILER 1		TRAILER 2	
Description	, EIII CEE			110.112.211.2	
No. of axles					
Trailer Length in metres (overall)					
Rough Sketch (for complex vehicle combinations	١				
Rough Sketch (101 complex vehicle combinations	)				
				T	
	WEIGHT	NO. OF WHEE	LS	Spacing to prev	ious axle
Axle No. 1 (Front-axle)					
Axle No. 2.					
Axle No. 3.					
Axle No. 4.					
Axle No. 5.					
Axle No. 6.					
Axle No. 7.					
Axle No. 8					

\* Note: An additional page should accompany any application exceeding the number of axles outlined above

## 24. Please tick 🗹 as appropriate, the proposed Escort\* arrangements to accompany the Vehicle/Load:

Axle No. 9 Axle No. 10. Axle No. 11. Axle No. 12.

No Escort required
Type A Escort required (At least one escort vehicle)
Type B Escort required (Two escort vehicles, or one escort vehicle and a police escort or equivalent)

<sup>\*</sup> Note: The minimum standard for escort shall be that outlined in Chapter 7 of European Best Practice Guidelines for Abnormal Road Transports, published by European Commission Directorate- General for Energy & Transport

25. Duration of Permit	Fee	Please tick as appropriate	Please state approx. no. of journeys likely per month (n/a to single permit).	On days when journeys are to occur, Please state no. of journeys likely per day (n/a to Single Permit)
Single Journey Permit	€80			
Permit valid for one month	€150			
Permit valid for three months	€200			
Permit valid for six months	€400			
Application Withdrawn/Revised Permit	€60			

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Please note that all applications can be received by email / post or fax at Cork County Council, Courthouse, Skibbereen, Co. Cork - Fax No. 028 - 21995, and be accompanied by any necessary supporting documentation and the relevant fee or debit/credit card payment details. Email address: abnormalloads@corkcoco.ie. Note it is an offence to amend any of the existing details on this Form.

Applications must be received at least 5 clear working days prior to the proposed journey, to allow sufficient time for processing of the application. Not less than 4 working days notice must also be given to the Gardai and can be emailed to traffic\_abloads@garda.ie

## Privacy & Data Protection:

Personal information collected by Cork County Council is done so in order for us to process your application. Legally we can process this information as it is necessary for us to comply with our statutory / legal obligations. The protection of your personal data is a key priority for the Council and your data will be processed in line with our Privacy policy which is available at <a href="https://www.corkcoco.ie/Privacy-Policy">https://www.corkcoco.ie/Privacy-Policy</a> or hardcopy from our offices at County Hall, Carrigrohane Road, Cork, Ireland. Should you have any questions about our privacy policy or the information we hold about you, please contact us by email to <a href="mailto:dpo@corkcoco.ie">dpo@corkcoco.ie</a> or write to us at Data Protection Officer, Cork County Council, County Hall, Carrigrohane Road, Cork, Ireland.

I/We wish to apply for a permit to use the vehicle(s) on the date(s) set out in this Application Form, on the public roads maintained by Cork County Council. I/We undertake to indemnify and refund Cork County Council the amount of any damage caused to any Public Road or Bridge or any fixture(s) thereon, by the use of the vehicle(s) or trailer(s) under the Permit, which may be granted under this application. I declare that the above information is accurate and complete, thereby enabling Cork County Council to make a full assessment of this application.

Signed:		Date:	
O	For and on behalf of applicant		

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Kev II	For Office	Use only – Pern	111 /NO	

## Please specify payment details and submit with application form:

## Debit/Credit Card Details:

Name of Card
Holder:
Card No:
Type of Card
(Visa/Debit/
Mastercard etc):
Expiry Date:
Amount: €