

**ONESTOPPERMIT**  
(Valid For One Power Unit Only)

**Permit Issued by:**  
**Pottawattamie County Engineer's Office**  
**Council Bluffs, IA 51503**  
**Phone No: (712) 328-5608**  
**Fax No: (712) 328-4751**

**Permit No.** \_\_\_\_\_

|         |      |       |                    |
|---------|------|-------|--------------------|
| Send To |      | Date  | Fax Number         |
| Address | City | State | Zip                |
|         |      |       | Check/Cash Receipt |

- Single Trip \$35  
 Annual Oversize \$50

|                                |                        |                              |                             |                     |             |  |
|--------------------------------|------------------------|------------------------------|-----------------------------|---------------------|-------------|--|
| Issued To                      |                        |                              |                             |                     |             |  |
| Address                        |                        |                              | City                        | State               | Zip         |  |
| Power Unit License No. & State | Power Unit Year & Make | Power Unit Registered Weight | Trailer License No. & State | Trailer Make        |             |  |
| Object or Load                 | Serial No.             | S.M.E. Plate No.             |                             |                     |             |  |
| Overall Length                 | Width                  | Height                       | Total Weight                | Trailer Length      | Load Length | Projections<br>Front:                      Rear: |
| Axle Weights                   | Single (20,000 max)    |                              | Tandem (40,000 max)         | Triple (60,000 max) |             | Quad (80,000 max)                                |
| Axle Spacing                   |                        |                              |                             |                     |             |  |
| Beginning Address              |                        |                              |                             | Destination Address |             |  |
| Approved Routes                |                        |                              |                             |                     |             |  |

**GENERAL REQUIREMENTS**

- |  |  |   |  |  |
|--|--|---|--|--|
| <input type="checkbox"/> Civilian front escort   | <input type="checkbox"/> With mounted height pole                                      | <input type="checkbox"/> Civilian rear escort | <input type="checkbox"/> Amber revolving light/strobe light with 360° visibility | <input checked="" type="checkbox"/> Speed Limit – Maximum posted limits unless otherwise specified on permit. Minimum 40 mph Interstate. |
| <input type="checkbox"/> Required on Highway   | <input type="checkbox"/> Required entire route   | <input type="checkbox"/> Front                | <input type="checkbox"/> Rear  | <input checked="" type="checkbox"/> Must carry copy of permit and General Provisions dated 8/97 and comply with them.                    |
| <input type="checkbox"/> Law enforcement escort  | See General Provisions for escort requirements for over width vehicles.                |   |  | <input checked="" type="checkbox"/> Road must be clear of ice & snow & visibility Must be at least 1/4 mile.                             |
| <input type="checkbox"/> SME plate must be displayed.  | Centerline all bridges: Primary at 5 mph. Interstate at posted speed.                  |   |  | <input checked="" type="checkbox"/> Necessary city and/or county permits must be obtained separately.                                    |
| <input type="checkbox"/> Centerline all bridges: Primary at normal speed or travel in normal lane on bridges at 5 mph. Interstate at posted speed. | Load must slow or stop when necessary to avoid approaching traffic when center lining. |   |  |  |
| <input checked="" type="checkbox"/> Hazardous materials must be transported in compliance with applicable federal regulations.                     | <input type="checkbox"/> Run around clearance on route #                               |   |  |  |
| <input type="checkbox"/> Run around clearance on route #   | <input type="checkbox"/> Round Trip. Return by reverse route within same five days.    |   |  |  |
| <input type="checkbox"/> Round Trip. Return by reverse route within same five days.  | <input type="checkbox"/> Special Requirements  |   |  |  |

|               |   |  |
|---------------|---|--|
| Valid Dates:  | <input type="checkbox"/> 1/2 hour before sunrise to 1/2 hour after sunset | <input checked="" type="checkbox"/> Continuous |
| Requested by: | Phone No.:  | Issued by:                                     |

Disclosure Statement: The information furnished on this application will be used by the Department of Transportation and the County to prepare and issue permits. All information applicable to a given permit is required and is public information. Failure to complete the application as required will result in denial of permit. Permit issuing authorities will not be responsible for any damages that are the result of the move. The State of Iowa, the Department of Transportation, and any other permit issuing authority assume no responsibility for the property of the permit holder.

Please detach and include this portion with your payment.

|               |              |
|---------------|--------------|
| Permit Number | Invoice Date |
|               |              |

Please Pay This Amount:

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**Remit To:**

Pottawattamie County Engineer Office  
17501 Eastern Hills Drive  
Council Bluffs, IA 51503