



EXTRAORDINARY TRAFFIC PERMIT

Application Fee: \$103

APPLICANT INFORMATION

Name _____
 Company _____ Email _____
 Phone _____ Fax _____

DATE(S) AND TIMES OF ACTIVITY

Date(s) From: _____ To: _____
 Time(s) From: _____ To: _____

ROUTE

Originating Location _____ Destination Location _____

Route Map provided

It is the driver's responsibility to operate the following described vehicle, in accordance with [District of Mission Traffic Regulation Bylaw 1698-1987](#), for the purpose and in the manner described upon the street(s) stated.

VEHICLE INFORMATION

Vehicle Type _____ Registration No. _____
 Licence No. _____

TRAILER INFORMATION

Trailer Type _____ Licence No. _____
 Overall Length _____ Overall Width _____ Overall Height _____ Overall Weight _____

The Applicant hereby agrees:

- To indemnify and save harmless the District against all claims, liabilities, judgments, costs and expenses which may accrue to or against the District in consequence of granting this permit.
- To produce this permit for inspection when so requested by any Peace Officer or representative of the Municipal Engineer.
- Site must be left in the same condition as it existed at the time the permit was issued. All damage to District property shall be restored to the existing condition or better at the expense of the applicant.
- All signing/delineation must conform to BC Ministry of Transportation's Traffic Control Manual for Work on Roadways at the expense of the applicant.

Applicant's Signature _____ Date _____

Please submit to: District of Mission, 7337 Welton Street, Mission, BC V2V 3X1

Phone: 604-820-3736; Email: engineering@mission.ca

FOR OFFICE USE ONLY

Date _____ Expiry Date _____
 Permit No. _____ Receipt No. _____

Comments _____

Permit Approved by _____

Signature _____

This permit must be carried in the hauling vehicle and be available upon request.