



Application  
**Single Trip Oversize Load**  
*This is NOT a Permit*

<b>Applicant Information</b> (Please print and fill out all boxes)						<input type="checkbox"/> New Request <input type="checkbox"/> Renewal Permit No. _____	
Name(s) (First, Last)				Name of Organization			
Mailing Address						Unit No.	
City		Province		Postal Code		Email address	
Phone No.			Alternate Phone No.				
<b>Description of Load</b> (Please print and fill out all boxes)							
Describe the Load							
Dimensions of Move		Height (m)	Width (m)	Length (m)	Gross Weight (tons)	No. of Axles	
Date of Movement (7-10 business days for application process) (yyyy-mm-dd)				Time of Movement			No. of Trips Required
<b>No travel permitted during rush hours (6:30 a.m. to 9:30 a.m. and 3:30 p.m. to 6:30 p.m.) Monday-Friday</b>							
<b>Route(s) of Move</b> (Please print and fill out all boxes)							
TTC Route		<input type="checkbox"/> Route Crosses Over/Across TTC SUBWAY: <input type="checkbox"/> Route Crosses Under TTC STREETCAR Overhead Wires:					
Metrolinx		<input type="checkbox"/> I confirm a Metrolinx signoff is attached to this application (if applicable) Crosses the following "Metrolinx Corridor Development Permit" and/or Metrolinx related "Permit Review Zone" (if applicable):					
FROM:							
TO:							
TO:							
TO:							
TO:							
TO:							
TO:							
TO:							
ENDING WITH:							
<p>This form to be submitted to the Permits and Enforcement district office by email according to the starting location based on City ward boundaries. To locate the ward your route originates from, please <a href="#">click here</a>. For additional information regarding Metrolinx or TTC, please visit our <a href="#">website</a>.</p>							
<input type="checkbox"/> Toronto and East York Tel: 416-392-7877 <a href="mailto:soprey@toronto.ca">soprey@toronto.ca</a> Wards: 4,9,10,11,12,13,14,19		<input type="checkbox"/> North York Tel: 416-395-6303 <a href="mailto:tprowny@toronto.ca">tprowny@toronto.ca</a> Wards: 6,8,15,16,17,18		<input type="checkbox"/> Etobicoke York Tel: 416-394-8418 <a href="mailto:tprowey@toronto.ca">tprowey@toronto.ca</a> Wards: 1,2,3,5,7		<input type="checkbox"/> Scarborough Tel: 416-396-7505 <a href="mailto:rowscarborough@toronto.ca">rowscarborough@toronto.ca</a> Wards: 20,21,22,23,24,25	
Applicant's Signature					Date (yyyy-mm-dd)		

The personal information on this form is collected under the authority of the City of Toronto Act, 2006, s.136(c) and Municipal Code Chapter 169. The information is used to evaluate your application work within the Public Right of Way and for contact purposes. Questions about this collection can be directed to the Right of Way Supervisor in the appropriate District.