

Super Load Application Fee Schedule

Permittee:

Permit #

Address:

Date:

Phone:

Email:

Description:

SUPER LOAD PERMIT

(Over 120,000 lbs., over 14' wide, over 14'6" high)

The following variables are taken into account:

$$\text{Total Cost} = \left(\frac{W/DAW}{A}\right)^4 \times (CrM) + \left(\frac{W/DAW}{A}\right)^4 \times (CbN)$$

- **W** = Total weight of load
- **A** = Number of Axles
- **M** = Total miles traveled
- **N** = Number of structures crossed
- **DAW** = Designed Axle Weight (18,000 lbs.)
- **Cr** = Cost per Mile (\$135)
- **Cb** = Cost per Structure (\$150)

W= _____
A= _____
M= _____
N= _____
DAW= _____
Cr= _____
Cb= _____

Please Remit Payment to:

Harrison Township
PO BOX 22
Ashville, Ohio 43103

**TOTAL
PERMIT
COST***

#DIV/0!

*Trip and Return

