



City of Farmington

430 Third Street

Farmington, Minnesota

651.280.6800 • Fax 651.280.6839

www.ci.farmington.mn.us

ANNUAL OVERWEIGHT PERMIT APPLICATION

Date _____

Business Name _____

Contact Person _____

Address _____

Phone No. _____ Fax No. _____

Email address: _____

Nearest State and County Roads _____

Preferred Route on City Streets _____

Purpose _____

The City will consider the request for preferred routes however, we reserve the right to revise routes as staff feels may be necessary.

Please note that it will be the businesses responsibility to distribute the permit applications to drivers who are hauling to and from your business.

The company is responsible for maintaining a list of drivers/companies that have been provided a copy of the permit. The current list shall be sent to the City Engineer on June 15 and December 15 of the permit year.

Signature

Date