



# Permit for Specialised Vehicles (Movement of Abnormal Loads)

Application Form/Permit

*\* Download, complete all sections and return to [traffic\\_abloads@garda.ie](mailto:traffic_abloads@garda.ie)*

Form of Notice to An Garda Síochána regarding the movement of an Abnormal Load as defined in S.I. No. 147 of 2009 Road Traffic (Permits for Specialised Vehicles) Regulations 2009. The abnormal load must adhere to the maximum weight limits set down by S.I. 5 Road Traffic (Construction and Use of Vehicles) Regulations 2003 and the maximum height limit set down in S.I. 366 of 2008 Road Traffic (Construction and Use of Vehicles)(Amendment) Regulations, 2008

This form when signed by the Garda Síochána Permits Officer grants permission to move abnormal loads as defined under the above Regulations, on inter-urban routes specified in the Schedule of Designated Roads. Any deviations from the Schedule of Designated Roads or above Regulations requires independent authorisation from the Local Authority concerned and or Minister for Transport.

## **1. Operator Details:**

Name:	_____
Address:	_____
Telephone:	_____
Mobile:	_____
Operators Road Freight Licence No.:	_____

## **2. Vehicle Details:**

<b><u>Tractor Unit:</u></b>	
Make: _____	Registration No: _____
<b><u>Trailer:</u></b>	
Make: _____	Registration No. (Trailer Mark): _____
	Year of Registration: _____

## **3. Load Details:**

<b><u>Overall Vehicle:</u></b>			
Length: _____	Max. Height: _____	Gross Vehicle Weight: _____	Width: _____

**4. Journey Type:**

Single Journey <input type="checkbox"/>	Return Journey <input type="checkbox"/>	Multiple Journey <input type="checkbox"/>
---	---	---

**5. Journey Details:**

**SINGLE JOURNEY**

<i>Point of Origin Full address:</i>	<i>Designated Route No:</i>	<i>Date:</i>	<i>Start Time:</i>	<i>Point of Destination Full address:</i>	<i>Date:</i>	<i>Finish Time:</i>

**RETURN JOURNEY**

	<i>Point of Origin Full address:</i>	<i>Designated Route No:</i>	<i>Date:</i>	<i>Start Time:</i>	<i>Point of Destination Full address:</i>	<i>Date:</i>	<i>Finish Time:</i>
<i>Outbound</i>							
<i>Inbound</i>							

**MULTIPLE JOURNEYS**

<i>Journey No:</i>	<i>Point of Origin Full address:</i>	<i>Designated Route No:</i>	<i>Date:</i>	<i>Start Time:</i>	<i>Point of Destination Full address:</i>	<i>Date:</i>	<i>Finish Time:</i>
<u>1</u>							
<u>2</u>							
<u>3</u>							
<u>4</u>							
<u>5</u>							

[More...](#)

\*Period of validation \_\_\_\_\_ to \_\_\_\_\_

(b) Does movement of load necessitate use of roads other than those on the ‘*Approved Route List*’?

YES       NO

If **YES** attach copy of County/City Council Permit and give details

**Details**

## **6. Escort Vehicle**

Will the vehicle be accompanied by an attendant/escort vehicle YES  NO

### **\* Please note:**

- For the 'Return' portion of a Journey only the supplied Addresses and Route is applicable in reverse.
- Loads in excess of **4.65 meters in height** are not covered under the remit of this Permit.
- Loads in excess of **4.3 meters in width** are not covered under the remit of this Permit.
- Load in excess of **27.4 metres in length** are not covered under the remit of this Permit.
- An application for a permit shall be made **at least five clear working days** before the proposed operation is to commence.
- The Permits Officer may require the applicant to provide any other information reasonably necessary to consider the application, and if he/she so requires need not consider the application until the applicant supplies the required information.
- Each vehicle operating under this system, travelling on a –
  - National Primary or National Secondary route **will have** an escort vehicle to the **front** with a flashing amber light(s) and a 'Wide Load' sign visibly displayed
  - or**
  - Dual carriageway or Motorway **will have** an escort vehicle to the **back** with a flashing amber light(s) and a 'Wide Load' sign visibly displayed
- In accordance with Article 6(3) of the concerned Regulations, the following restriction(s)/ condition(s)/ limitation(s) are subject to the Permit for Specialised Vehicle being granted

**\*For Official Use Only**

**Restriction(s)/ Condition(s)/ Limitation(s) –**

**Permit Granted Yes/No:**

**Signature An Garda Síochána Permits Officer:**

\_\_\_\_\_  
**Chief Superintendent**

<b><i>Journey No:</i></b>	<b><i>Point of Origin Full address:</i></b>	<b><i>Designated Route No:</i></b>	<b><i>Date:</i></b>	<b><i>Start Time:</i></b>	<b><i>Point of Destination Full address:</i></b>	<b><i>Date:</i></b>	<b><i>Finish Time:</i></b>
<u>1</u>							
<u>2</u>							
<u>3</u>							
<u>4</u>							
<u>5</u>							
<u>6</u>							
<u>7</u>							
<u>8</u>							
<u>9</u>							
<u>10</u>							
<u>11</u>							
<u>12</u>							
<u>13</u>							
<u>14</u>							
<u>15</u>							
<u>16</u>							
<u>17</u>							
<u>18</u>							
<u>19</u>							
<u>20</u>							
<u>21</u>							
<u>22</u>							
<u>23</u>							
<u>24</u>							
<u>25</u>							
<u>26</u>							
<u>27</u>							
<u>28</u>							
<u>29</u>							
<u>30</u>							
<u>31</u>							
<u>32</u>							
<u>33</u>							
<u>34</u>							

[Click here to complete the remainder of the Application..](#)