

**FINGAL COUNTY COUNCIL, OPERATIONS DEPT., GROVE ROAD, BLANCHARDSTOWN, DUBLIN 15.**

**E-mail: [AbnormalLoads@fingal.ie](mailto:AbnormalLoads@fingal.ie)**

**Contact: Erin Greaves (0873741291) / Caroline Donnelly (0871139551)**

**S.I. 5 of 2003, Road Traffic (Construction and Use of Vehicles) Regulations 2003,  
S.I. No. 366 of 2008, Road Traffic (Construction and Use of Vehicles) (Amendment) Regulations  
2008**

**Application for Abnormal Load Permit to authorise the Use of Vehicles(s) on Public Roads  
maintained by Fingal County Council  
Incomplete applications will be returned**

**Applicant:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Destination:** \_\_\_\_\_

**Route of Journey (All roads in Fingal area to be specified by name or number):**

\_\_\_\_\_  
\_\_\_\_\_

**Date(s) of Journey:** \_\_\_\_\_ **If renewal state previous number** \_\_\_\_\_

**Particulars: (Please give in metric measurements)**

	Vehicle	Trailer Load	Overall
Length	_____	_____	_____
Width	_____	_____	_____
Height	_____	_____	_____
Weight	_____	_____	_____
Type of Vehicle(s): _____		No of Axles: _____	
Load to be carried: _____		Weight on Axle 4: _____	
Weight on Axle 1: _____		Weight on Axle 5: _____	
Weight on Axle 2: _____		Weight on Axle 6: _____	
Weight on Axle 3: _____		Dist. betw. Axle 3 & 4: _____	
Dist. betw. Axle 1 & 2: _____		Dist. betw. Axle 4 & 5: _____	
Dist. betw. Axle 2 & 3: _____		Dist. betw. Axle 5 & 6: _____	
Dist. betw. Axle 6 & 7: _____		Dist. betw. Axle 7 & 8: _____	
Dist. betw. Axle 8 & 9: _____		Dist. betw. Axle 10 & 11: _____	

Dist. betw. Axle 11 & 12: \_\_\_\_\_

Reg. No (max of 6 reg no's on any one permit): \_\_\_\_\_

**Insurance Details:**

Name of Insurance Company: \_\_\_\_\_ Insurance Policy No: \_\_\_\_\_

Expiry date of Policy: \_\_\_/\_\_\_/\_\_\_ Indemnity Limit for Third Party Damage: **Minimum €6.5m**

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**Applicant:** \_\_\_\_\_

**Note:** Applicants are required to give **7 days** notice of this application to the Commissioner of An Garda Síochana with a copy of the application. Fingal County Council requires **7 days** notice to process this application. Applicants are also required to hold full current motor taxation for vehicle(s).

I/We wish to apply for a permit to use the above vehicle(s) on the date(s) set out, on the public roads maintained by Fingal County Council and I/We undertake to refund to Fingal County Council the amount of damage caused to any public road by the use of the vehicle or trailer under the permit which may be granted as a result of this application.

I certify that the above information is true and correct

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

The appropriate fee for an Abnormal Load Permit must accompany this application. Cheques/Postal Orders etc should be made payable to Fingal County Council. We also accept Visa/Mastercard and Laser.

**Abnormal Load Charges**      **RD014**      **Please Tick**

Normal 3 month Charge      €100.00     

1 single journey      €25.00     

*Please note:- Any cheques drawn on banks outside the island of Ireland are subject to an additional €3 bank handling charge.*

**Please Confirm How You Wish To Pay:**

Cheque (Must be Sent By Post):

Bank Transfer (Details to be Provided):

Credit Card (Please provide phone number to be contacted for details) :

Phone Number/Contact for Bank Details/Card Details: \_\_\_\_\_

**\*\*\* Road Traffic (Permits for Specialised Vehicles) Regulations 2009\*\*\***

**An Garda Síochána now issue an abnormal load permit to vehicles travelling on the M1/M50 in the Fingal area. For further information Phone 01-6661956/54**

**Loads in excess of 4.65m in height are not covered by An Garda Síochána**

**Loads in excess of 4.3m in width are not covered by An Garda Síochána**

**Loads in excess of 27.4m in length are not covered by An Garda Síochána**

**Overall Vehicle Weight in excess of 44,000 Kgs are not covered by An Garda Siochana**