

LCV Origin/Destination Location - Road Authority Consent Long Combination Vehicle (LCV) Program

1. Road Authority Information ("Road authority" is taken to mean the party having control over a roadway, including municipalities, Hwy 407ETR, etc.)

Name of Road Authority			
Mailing Address			
Unit No.	Street No.	Street Name	PO Box
City/Town		Province	Postal Code

2. LCV Origin/Destination Location

Name of Location			
Address			
Unit No.	Street No.	Street Name	PO Box
City/Town		Province	Postal Code
Primary Highway and Exit Name/No.			
Proposed Route to O/D Location			
			Length of Route (km)

3. Consent for LCV Travel

We, the road authority, have reviewed the LCV engineering and traffic assessment for the above route performed by:

Name of Engineering Consultant _____

As the road authority controlling all or part of this route, we consent to MTO allowing LCV travel on the portion of the route under our control.

Signature of Authorized Road Authority Official	Date (yyyy/mm/dd)
---	-------------------

Name (Last Name, First Name)	Title
Telephone No. (include area code)	E-mail Address

Subject to Following Restrictions:

- No Restrictions
- Time of day (specify) _____

4. Consent Withdrawal

Road authority consent may be modified or withdrawn by notifying MTO in writing or by e-mail to: OO.Permit.Department@ontario.ca. MTO must also be provided advance notice of any road work or alterations to the route which may impair LCV travel.

5. MTO Review

MTO will review the engineering and traffic assessment and may accept or reject the proposed LCV route based on the engineering assessment and road authority consent. If accepted, the location and route will be listed as an attachment to the MTO-issued permits of authorized LCV carrier(s). Note that MTO has sole authority to issue permits for this type of vehicle combination.

6. Additional Comments/Information