

**Walla Walla County
Public Works Department**

PO Box 813
990 Navion Lane
Walla Walla, WA 99362
phone (509) 524-2710

(Revised 4/6/2017)

This is an agreement in which the Public Works Department grants the applicant permission for extended use of public roads under the jurisdiction of Walla Walla County. **The fee for processing this agreement is \$100. This fee is non-refundable.** Please make checks payable to Walla Walla County Department of Public Works. Processing will commence upon receipt of payment of the fee.

This form is available online at <http://wwwcountyroads.com> or at the Public Works Department main office.

APPLICATION FOR HAUL ROUTE AGREEMENT

Contact Name: _____ Phone: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zipcode: _____

Email Address: _____

Date Submitted: _____

Start Date: _____

End Date: _____

of Working Days: _____

<u>Location</u>		
Township: _____	Range: _____	Section: _____
Township: _____	Range: _____	Section: _____
Township: _____	Range: _____	Section: _____

<u>Location</u>		
Township: _____	Range: _____	Section: _____
Township: _____	Range: _____	Section: _____
Township: _____	Range: _____	Section: _____

Purpose of Haul Route:

Proposed Haul Route:

Applicant/organization indemnifies and holds harmless Walla Walla County from any suit, claim or action for injury or death or other cause of property damage arising from the issuance of this agreement. Applicant certifies the information given herein, including all submittals and attachments is true and correct to the best of his/her knowledge. Applicant understands additional conditions may be placed on this request if approved.

Include NECESSARY Items to Process Permit:

\$100 Payment

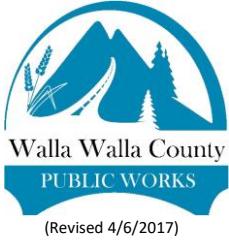
Signature:

Certificate of

Liability

_____ Naming Walla Walla County primary, non-contributory

Printed Name: _____



**Walla Walla County
Public Works Department**
PO Box 813
990 Navion Lane
Walla Walla, WA 99362
phone (509) 524-2710

This page reserved for office use only

APPLICATION FOR HAUL ROUTE AGREEMENT

Office Use Only

Fee paid

Receipt #: _____

Date: _____

Route Pre Inspection Date: _____

CRView Drive Date: _____

Road Conditions Prior to Haul

Conditions of Haul Route Agreement

Applicant Approved: _____

Date: _____

Public Works Approved: _____

Date: _____



**Walla Walla County
Public Works Department**
PO Box 813
990 Navion Lane
Walla Walla, WA 99362
phone (509) 524-2710

This page reserved for office use only

APPLICATION FOR HAUL ROUTE AGREEMENT

Office Use Only

Route Post Inspection Date: _____

Road Condition After Haul

Corrective Measures Required

Corrections Accepted: _____

Date: _____