

OVERSIZE LOAD NOTIFICATION FORM

(To be provided to Lead Agent as soon as possible for response **as outlined in DOT regulations**)

(Lead Agent enter all information on NJUNS Website www.njuns.com, Oversize Load Login)

Date: _____

Mover's Information:

Name: _____

Phone Number: _____ Fax Number: _____

Address: _____

Load Move Coordinator's Name: _____

Load Mover Member Code (If NJUNS Member) _____

Lead Agency Information:**

Lead Agency: _____

Phone Number: _____ Fax Number: _____

Contact Name: _____

Proposed Move Date: _____

(This date includes a minimum 72 business hour notice to all affected Utilities)

Beginning Address or Location:

County: _____ City: _____

Address: _____

Ending Address or Location:

County: _____ City: _____

Address: _____

Proposed Route: (Including County, City, State Routes, Etc.)

County: _____ City: _____

Route: _____

County: _____ City: _____

Route: _____

County: _____ City: _____

Route: _____

County: _____ City: _____

Route: _____

County: _____ City: _____

Route: _____

If more room is needed, attach additional sheet.

Load Dimensions (All must be specified):

- **Maximum Loaded Height:** _____
- **Maximum Width:** _____
- **Maximum Length:** _____

Proposed Move Date: _____

DOT rules require prior approval of all affected Utilities. (Rule 672-2-.04 (1) (f))

Check One of the Following Insurance Options (must check one):

OPTION 1 _____ **No one shall ride on top of the house, except in one circumstance: When the house being moved will travel through an area at which a traffic signal is located, the Oversize Load mover will allow individuals on the top of the house for only as long as it takes to move the house past the traffic signal, providing this does not place the individuals within (10) feet of an electrical utility line.**

OPTION 2 _____ **A person shall be on the house. I agree to indemnify Utilities with a signed agreement and insurance, as required. No escort shall be provided by Electric Utility. ***\$2 million insurance naming Utilities as additional insured is required.**

OPTION 3 _____ **The Oversize Load mover shall provide for an electric Utility to escort the house during a move. An Electric Utility shall handle lines to prevent the Oversize Load mover personnel from working within (10) feet of energized lines. This must be agreed to by all Utilities. ***\$1 million insurance naming Utilities as additional insured is required. Insurance Certificate is attached.**

*****NOTE: See attached Indemnification**

**** LEAD AGENCY (The Lead Agency will be the electrical supplier at the beginning of the move. If the house is coming from another state, the Lead Agency will be the electrical utility providing end service.)**

- **Any Utility shall have the authority to stop the mover when Utility determines that proceeding is unsafe.**
- **The Mover shall give notice to all affected Utilities a minimum of 72 business hours before the actual move. This 72 hours can be concurrent with the 72-hour DOT application requirement and begins at 7:00 AM the day after the Lead Agent creates the NJUNS ticket, excluding holidays, and weekends.**

Signed: _____ **Date:** _____

For specific member contact information, go to www.njuns.com and click on Member States. Under Georgia, click on View Oversize Load Member Codes.