

## LOAD RESTRICTION EXEMPTION APPLICATION

Exemption Type	Business/Corporation	Individual/Personal Use	Agricultural
Legal Company Name (if applicable)			
Contact Name			
Contact Phone Number			
Mailing Address			
Contact Email			
Briefly state why you require an exemption (continuity of business, essential service, etc).			
Will subcontractors require use of yo Yes No	ur exemption? Do you inter	<b>d on performing maintenance on ar</b> Yes No	ny of the roads requested?

\*\*NOTE: You will be provided with a 4 digit PIN number as part of your exemption. All vehicles operating under the exemption must provide this PIN number upon request. If you believe a third party has unauthorized access or has unauthorized use of your PIN number, please contact <a href="mailto:Peace.Exemptions@gov.bc.ca">Peace.Exemptions@gov.bc.ca</a> and request a new PIN number. If the PIN number is not provided, the carrier may be subject to enforcement action.



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Road Name and/or Road Number	KMs	Exact Start Location	Exact End Location	No. of Loads Daily	Start Date	End Date
	+					
	+ +					