



RESORT VILLAGE OF CANDLE LAKE

Box 114 • Candle Lake, SK • S0J 3E0
Phone: (306) 929-2236 • Fax: (306) 929-2201
office@candlelakeresort.ca

ROAD RESTRICTIONS PERMIT

Permit No. _____
YEAR MONTH NO.

Time Issued: _____ a.m. p.m.

Month: _____ Day: _____ Year: _____

Permission is hereby granted to:

Company/Owner: _____

Address: _____

City: _____

Phone number: () _____

Province: _____

Postal Code: _____

Fax Number: () _____

To Operate: _____ License No. _____

Describe type of unit, ex. Tractor and trailer, tandem, single axle truck etc. (Power unit) Prov. or state)

Make, Model Year _____

Of power unit: _____

Carrying a load of: _____

Number of axles: _____

Tire Sizes: _____
Steering Drive Trailer

1. Maximum gross vehicle weight not to exceed: _____ kilograms
And/or
2. Maximum gross weight of the steering axle not to exceed _____ kilograms
And/or
3. Maximum gross weight of the tandem axle not to exceed _____ kilograms

Permitted Route: _____

Permit effective from: _____ to _____
(time and date) (time and date)

Restrictions/Conditions of Permit

- > Any violation of this permit will be deemed sufficient reason to suspend or cancel this Permit
- > This permit shall be carried at all times and shall be produced upon request by a Peace Officer
- > This permit is also valid during Spring Road Conditions

Issued by: _____
Resort Village of Candle Lake