

AltaLink High Load Moves - Request Form

Contact Information:

Contact Person:

Contact Phone Number:

Contact Email Address:

Company Name (if applicable):

Billing Address:

Load Supervisor/Driver (If different from Contact Person):

Load Supervisor/Driver Phone Number:

PO Number:

Load Information:

Load Type (Building/Tank/Module etc.):

Load Move Date and Time (Start):

Departing From (Name/Address/Legal Description):

Destination (Name/Address/ Legal Description):

Load Dimensions (In Metres) – Please provide largest dimension for a given category

Height:

Width:

Length:

Planned Route:

Additional Comments:

