



AltaLink High Load Moves - Request Form

Contact Information:

Company Name (if applicable):

Billing Address:

Accounting Dept. Email Address:

Contact Person:

Contact Phone Number:

Contact Email Address:

PO Number:

Load Information:

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

Number of Loads:

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: (Provide Direction of Travel)

Pullout/Overnight Location:

Additional Comments:

