

**TRANSPORTATION PERMIT**

TR-0015 (9/2000)

IN COMPLIANCE WITH YOUR REQUEST AND SUBJECT TO ALL THE TERMS, CONDITIONS AND RESTRICTIONS WRITTEN BELOW AND IN THE ACCOMPANIMENTS, PERMISSION IS HEREBY GRANTED TO:

<p><b>PERMIT VALID:</b></p> <p>FROM: _____</p> <p>TO: _____</p> <p><b>MOVEMENT AUTHORIZED:</b></p> <p>SATURDAY: _____</p> <p>SUNDAY: _____</p> <p>DARKNESS (CVC280): _____</p>	<p><b>PERMIT NUMBER</b></p>  <p><b>THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ACCOMPANIMENTS:</b></p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>
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**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY/STATE/ZIP** \_\_\_\_\_

**OFFICE PHONE NUMBER** (Including Area Code) \_\_\_\_\_ **OFFICE FAX NUMBER** (Including Area Code) \_\_\_\_\_

DESCRIPTION OF THE LOAD OR EQUIPMENT AND MODEL NO.:  HAUL  DRIVE  TOW

DIMENSIONS OF LOAD:

DESCRIPTION OF HAULING EQUIPMENT:

VEHICLE WIDTH:	SEMI-TRAILER LENGTH:	KINGPIN TO LAST AXLE:	COMB. VEHICLE LENGTH:						
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NUMBER OF TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									
LOADED HEIGHT:	LOADED WIDTH:	LOADED OVERALL LENGTH:	LOADED OVERHANG:	WEIGHT CLASS:					

ORIGIN (INCLUDE CITY/TOWN AND ON RAMP/CROSS STREET): \_\_\_\_\_ DESTINATION (INCLUDE CITY/TOWN AND EXIT RAMP/CROSS STREET): \_\_\_\_\_

**AUTHORIZED STATE HIGHWAYS - CITY AND/OR COUNTY PERMITS MAY BE REQUIRED WHENEVER THE \* IS SHOWN IN THE STATE ROUTE.**

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\_\_\_\_\_

PILOT CAR  YES  NO

\_\_\_\_\_

\_\_\_\_\_

CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION			APPLICANT SIGNATURE		DATE
CREDIT CARD EX. DATE	FEE	NUMBER OF TRIPS	AUTHORIZED STATE AGENT		DATE
	\$				
REQUESTED ROUTE :			APPLICANT CONTACT PERSON (PRINT)		
_____			_____		