

Sierra Madre

TRANSPORTATION PERMIT OVERSIZE LOAD

PERMIT VALID:				PERMIT NUMBER			
FROM:				THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ACCOMPANIMENTS: <input type="checkbox"/> _____ <input type="checkbox"/> _____			
TO:							
MOVING AUTHORIZED:							
SATURDAY:		Yes <input type="checkbox"/>	No <input type="checkbox"/>				
SUNDAY:		<input type="checkbox"/>	<input type="checkbox"/>				
DARKNESS (CVC280):		<input type="checkbox"/>	<input type="checkbox"/>				
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.:				<input type="checkbox"/> HAUL <input type="checkbox"/> DRIVE <input type="checkbox"/> TOW			
DIMENSION 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
NUMBER OF TIRES PER AXLE:							
DISTANCE BETWEEN AXLES:							
WIDTH OF AXLES AT TIRE SIDEWALL:							
MAXIMUM ALLOWABLE WEIGHT:							
LOADED HEIGHT:	LOADED WIDTH:	OVERALL LENGTH:		LOADED OVERHANG:	FOH: ROH:	WEIGHT CLASS:	
ORIGIN:				DESTINATION:			
AUTHORIZED ROUTE							
PILOT CAR <input type="checkbox"/> YES <input type="checkbox"/> NO							
CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION				APPLICANT SIGNATURE		DATE	
CREDIT CARD EXP. DATE	FEE:	NUMBER OF TRIPS		AUTHORIZED AGENT		DATE	
REQUESTED ROUTE:							
						APPLICANT CONTACT PERSON (PRINT)	