

Oversize/Overweight Vehicle Permit Application

***** Same Day Service Not Guaranteed if Received After 3:00 PM *** Single Trip Permits are valid for 3 Days*****

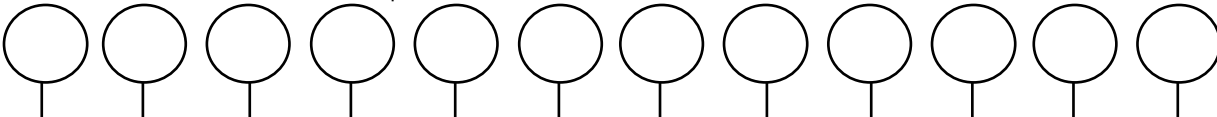
Company Name			Contact Name		DOT #
Street Address			Phone (With Area Code)		Permit Start Date
City	State	Zip Code	Fax (With Area Code)		Permit End Date

Power Unit License Number	Transponder Number	VIN Number (Complete)			
Make	Year	Base State	Unit #		

DETAILED LOAD DESCRIPTION					<input type="checkbox"/> Tractor/Trailer (Connected by 5th Wheel) <input type="checkbox"/> Truck/Trailer (Connected by Hitch) <input type="checkbox"/> Single Vehicle	
Origin (City)			Destination (City)			

Power Unit # of Axles	Trailing Unit # of Axles	Gross Weight	Licensed Weight		Axle Spacing Report #	
Width	Height	Total Overall Length	Load Length or Trailer Length (Whichever is longer)		Front O/H	Rear O/H

Overweight Only: Axle spacings are required if no axle spacing report number is provided. Give axle spacing measured from center of axle to center of axle in feet and inches and number of tires per axle.

Tires per axle: 

Spacing: _____

Axle Weights: | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ | _____ |

Tire Size on Steer Axle	Lift Axle? <input type="checkbox"/> Yes <input type="checkbox"/> No	Which Axle?	Tire Size?	<input type="checkbox"/> Single <input type="checkbox"/> Dual	Self Steering? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Routes of Travel (State Highways with mileposts for single trip oversize/overweight required.)

Highways	Beginning MP	Ending MP	Highways	Beginning MP	Ending MP

County/City Miles _____ Return Trip? Yes No

E-mail Address		FOR OFFICE USE ONLY	
		Permit No. _____ Amount _____	
Print Name as it Appears on Credit Card		Signature	Date
Credit Card Type <input type="radio"/> Visa <input type="radio"/> Mastercard	Bankcard # (All applications are processed over the Internet)		Expiration Date