Phone # 800-877-8499 Fax # 573-751-7408

		For Office Use Only
Date	CK #	/nt'l

THIS FORM MUST BE COMPLETED AND ACCOMPANY EACH DEPOSIT

MAIL THIS FORM TO: MISSOURI DEPARTMENT OF TRANSPORTATION

MOTOR CARRIER SERVICES UNIT

OD/OW PERMIT SECTION

P.O. BOX 893

JEFFERSON CITY, MO 65102

STREET ADDRESS 1320 Creek Trail Dr

JEFFERSON CITY, MO 65109

COMPLETE THIS PORTION TO MAKE A DEPOSIT TO YOUR ESCROW ACCOUNT ESCROW ACCOUNT DEPOSIT FORM

ACCOUNT NO. IF ALREADY ASSIGNED _____ AMOUNT OF DEPOSIT \$_____

NAME OF APPLICANT	USDOT #		
ADDRESS			
CONTACT	PHONE		
COMPLETE THIS PORTI ON TO PURCHASE PRE-ISSUE (BLUE FORMS) PRE-ISSUE PERMITS ARE \$12.00 EACH AND AVAILABLE ONLY IN BUNDLES OF FIVE (5) (\$60.00) PRE-ISSUE ACCOUNT DEPOSIT FORM			
ACCOUNT NO. IF ALREADY ASSIGNED	<u> </u>		
NAME OF APPLICANT	USDOT #		
ADDRESS_			
CONTACT	PHONE		
NUMBER OF PERMITS REQUESTED	AMOUNT ENCLOSED \$		

ALL MONEY DRAFTS ARE TO BE MADE PAYABLE TO: DI RECTOR OF REVENUE - CREDIT STATE ROAD FUND

(Your draft is your receipt)

Refer to the Overdimension and Overweight Permit Regulations Book for information regarding your Escrow or Pre-Issue Account