GEORGIA DEPARTMENT OF TRANSPORTATION
OVERSIZE PERMIT UNIT

IF YOU HAVE ANY QUESTIONS, PLEASE CALL 1-888-262-8306 FOR CUSTOMER SERVICE
MAILING ADDRESS:
Georgia Department of Transportation
Oversize Permit Unit
P. O. Box 17937
Atlanta, GA 30316-0937

E-MAIL COMPLETED APPLICATION TO
PEWIREROOM@DOT.GA.GOV

OR FAX APPLICATION TO:
404-635-8501;
404-635-8507; 404-635-8509

SINGLE TRIP PERMIT APPLICATION

IF ORDERING FOR AN INDIVIDUAL, YOU MUST PROVIDE INSURANCE INFORMATION & COMPLETE DRIVER'S LICENSE INFORMATION.

US DOT# _____ COMPANY NAME: _____ BEGIN DATE: _____

ESCROW ID# _____ *or* CREDIT CARD #: _____ EXPIRATION: FOR CREDIT CARD _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COMPANY PHONE #: _____ CONTACT PERSON: _____ CONTACT PHONE #: _____

INSURANCE CARRIER: _____ POLICY #: _____ EXPIRATION: _____

SEND TO FAX #: _____ *or* E-MAIL TO: _____

LOAD DESCRIPTION: _____

IF APPLICABLE, PLEASE PROVIDE:

SERIAL # OR CONTAINER # _____ MOBILE HOME MAKE: _____

TRACTOR MAKE: _____ TRACTOR TAG: _____ STATE: _____

TRAILER TAG: _____ STATE: _____

Overall WIDTH _____ **FT.** _____ **IN.** **Overall HEIGHT** _____ **FT.** _____ **IN.** **Overall LENGTH** _____ **FT.** _____ **IN.**

TOTAL GROSS WEIGHT _____ # OF AXLES _____

TOTAL GROSS WEIGHT AND NUMBER OF AXLES ARE REQUIRED.

CITY OF ORIGIN OR BORDERING STATE LINE _____ CITY OF DESTINATION OR BORDERING STATE LINE _____

REQUESTED ROUTE:

BEGINNING POINT (INTERSECTION OR ADDRESS): _____

ENDING POINT (INTERSECTION OR ADDRESS): _____

(NOTE: CREDIT CARD USE IS ACCEPTED BY THE OVERSIZE PERMIT UNIT AND IS OFFERED AS AN OPTION OF CONVENIENCE FOR OUR CUSTOMERS. CHARGES FOR THIS SERVICE IS $7.00)

Revised 10/26/10