STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

TRANSPORTATION PERMIT

TR-0015 (REV. 08/2015)

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:

PERMIT VALID:

FROM: _____

TO: _____

MOVEMENT AUTHORIZED:

PERMIT VALID FOR 7 CONSECUTIVE DAYS

SEE 24/7 TRAVEL CONDITIONS FOR AUTHORIZED TIMES OF MOVEMENT.

☐ NO NIGHT TRAVEL

PERMIT NUMBER:

THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ACCOMPANIMENTS:

- ☒ Permit Conditions 04/2007
- ☒ 24/7 Travel Conditions
- ☐ Calif Vehicle Inspection Report
- ☐ SC MH ☐ MH Certifications
- ☐ Pilot Car Special Conditions
- ☐ Curfew Maps [LA, SAC, SD, SF]
- ☐ SC Holiday Conditions
- ☐
- ☐
- ☐

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:	KINGPIN TO LAST AXLE:	SEMI-TRAILER LENGTH:	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									

NOT TO EXCEED THE LOADED DIMENSIONS SHOWN BELOW OR AXLE WEIGHTS SHOWN ABOVE

LOADED HEIGHT:	LOADED WIDTH:	LOADED OVERALL LENGTH:	LOADED OVERHANG:	WEIGHT CLASS:

ORIGIN:

DESTINATION:

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

For office use only

PILOT CAR ☐ YES ☐ NO

CASH, CHARGE, CREDIT CARD OR EXEMPT INFORMATION:			APPLICANT SIGNATURE:	DATE:
CREDIT CARD EXP. DATE:	FEE: $	NUMBER OF TRIPS:	AUTHORIZED STATE AGENT:	DATE:

REQUESTED ROUTE: (*Include Address of Origin and Delivery Site):*

CONTACT PERSON (PRINT):

For Permits information, contact the Transportation Permits Office at (916) 322-1297.

ADA Notice For individuals with sensory disabilities, this document is available in alternate formats. For alternate format information, contact the Forms Unit at (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.