

DO NOT WRITE IN SHADED AREAS

COUNTY OF MENDOCINO
DEPARTMENT OF TRANSPORTATION
TRANSPORTATION PERMIT



IN COMPLIANCE WITH YOUR REQUEST AND
SUBJECT TO ALL THE TERMS, CONDITIONS,
AND RESTRICTIONS WRITTEN BELOW AND THE
ATTACHMENTS, PERMISSION IS HEREBY GRANTED TO:

PERMIT VALID: FROM:	PERMIT NUMBER
TO:	
MOVING AUTHORIZED:	
SATURDAY:	
SUNDAY:	THIS PERMIT IS NOT VALID WITHOUT THE FOLLOWING ATTACHMENTS: <input type="checkbox"/> Permit Conditions <input type="checkbox"/> Holiday Restrictions <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
DARKNESS (cvc 280):	

NAME	
ADDRESS	
CITY/STATE/ZIP	
OFFICE PHONE NUMBER (include Area Code)	FAX NUMBER (include Area Code)

SHOW DESCRIPTION OF THE LOAD – INCLUDE DIMENSIONS OF LOAD
 Authorization is granted for the following: Haul Drive Tow

DESCRIPTION OF HAULING EQUIPMENT (TRUCK)

AXLE NUMBER	VEHICLE WIDTH			KINGPIN TO LAST AXLE		COMB. VEHICLE LENGTH			
	1	2	3	4	5	6	7	8	9
NUMBER TIRES PER AXLE									
DISTANCE BETWEEN AXLES									
WIDTH OF AXLES AT TIRE SIDEWALL									
MAXIMUM ALLOWABLE WEIGHT									

➔ LOADED DIMENSIONS GREATER THAN THOSE SHOWN BELOW OR WEIGHTS EXCEEDING THOSE SHOWN ABOVE ARE NOT AUTHORIZED ➔

LOADED HEIGHT:	LOADED WIDTH:	LOADED OVERALL LENGTH:	LOADED OVERHANG:	WEIGHT CLASS:
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ORIGIN: ADDRESS	DESTINATION: ADDRESS
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AUTHORIZED COUNTY ROADS · STATE AND/OR CITY PERMITS ARE REQUIRED WHEREVER THE * IS SHOWN IN THE COUNTY ROUTE.	APPLICANT: DO NOT WRITE IN THIS SPACE
PILOT CAR <input type="checkbox"/> Yes <input type="checkbox"/> No	

CASH, CHECK, OR ESTABLISHED CREDIT:	APPLICANTS SIGNATURE	DATE
FEE \$	NUMBER OF TRIPS	AUTHORIZED COUNTY AGENT'S SIGNATURE
		DATE

APPLICANT REQUESTED ROUTE: (Include Address of Origin and Delivery Site) – continue on additional pages if needed